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To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE variety of hypotheses which have been formed, to account for the important function of the Liver; and the manner in which the blood is distributed to this organ being not analogous to that in any other organ in the human body, render this subject one of the most curious in physiological inquiry.

Secretions in general are formed from arterial blood; and most frequently the artery which supplies the secreting viscus with blood for its nourishment, supplies also an extra quantity for its secreting function. This, however, is not the order of circulation through the liver. The hepatic artery is supposed to supply it with nourishment, and the vena portarum with blood, from which it secretes bile. This is probably true. But the properties ascribed to this venous blood, and the various arguments made use of to demonstrate those properties, are somewhat vague. It cannot easily be admitted, that after it has given to other viscera its best properties, the blood should then be fit for a secretion of as much importance as any other in the animal economy. That such blood does pass through the vena portarum is admitted: and that bile is secreted from blood which passes through the vena portarum is also admitted; therefore the conclusion at present is, that "venous blood is more favourable to this secretion than arterial;" and, "that whatever changes are induced on the blood in passing from the arterial to the venous condition, those changes furnish the principles which adapt the blood more completely to this purpose." This is a conclusion if not upon wrong, at least upon doubtful premises; and the error seems to be supported by our ignorance of the real use of the spleen. The human mind hesitates

sitates upon admitting a principle so contrary to the general law of Nature, therefore, to support the favourite hypothesis, it calls in the assistance of the spleen to furnish the peritoneal venous blood with a "putrescent and consequently diluting liquor," to make a mass, said to be the most proper for the secretion of bile.

These arguments are certainly not demonstrative, nor are they supported by a single fact. Let us, therefore, change the position, and instead of venous putrescent blood, allow the liver, blood for secretion as pure as any other secreting viscus, and endeavour to demonstrate the fact upon those premises. Let us suppose that *the liver secretes bile from arterial blood.*

That bile *may* be secreted from arterial blood, few will deny, that have read Mr. Abernethy's case in the Philosophical Transactions. In this case, the vena portarum did *not* enter the liver; and it is not very improbable that Nature may supply the liver with arterial blood for secretion, through means that have hitherto eluded observation. The spleen, perhaps, is the viscus through whose mediation the liver may be so supplied: its anatomy, in my opinion, favours this conclusion; it is spongy and elastic, and therefore well calculated to act as a reservoir of arterial blood, for the use of the liver: it has no excretory duct, therefore probably it secretes nothing *from* the blood. This opinion is further confirmed by an experiment of Dr. Saunders,* which was successfully made for another purpose. But it is an experiment well calculated to

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* Treatise on the Liver, Chap. iii. § 10. Experiment.

"The *abdomen* of a living dog being opened, and the spleen with its vessels being drawn gently out, blood was taken both from the artery and vein, and received into cups of similar shape and equal size. On weighing such, there was found to be 420 grains of arterial, and 468 of venous blood. Both coagulated in less than two minutes, and in about the usual time they separated into *serum* and *crassamentum*. In 24 hours, the *serum* of both was accurately weighed: the 420 grains of blood from the splenic artery separated 191 grains of serum; the 468 grains from the vein separated 213 grains.

§ 11 "But our conceptions of this matter will be much assisted by instituting a comparison with one common standard, still preserving the *ratio*.

"Therefore we say, 1000 parts of blood from the splenic artery separated 454, while the same quantity from the vein yielded 455: a difference so inconsiderable as this surely can never be laid hold of as a proof that the spleen is subservient to the liver, on the principle of a diluting organ.

to prove that the blood, passing from the spleen by the splenic vein, is *arterial* blood.

Things equal to one and the same thing, are equal to one another; the blood from the splenic vein is as much arterial as that from the artery, excepting the $\frac{1}{455}$ part, which might arise from the demand of the spleen itself for its own nourishment.

A question here naturally presents itself. If the spleen supply the liver with arterial blood for the secretion of bile, what use can be assigned for the venous blood, which passes shrough the vena portarum from the chylopoietic viscera? an use, apparently, of no small importance.— The texture of the liver being composed almost wholly of blood vessels, and very inelastic, seems to require a *constant* stream of blood to support its *bulk* and *figure*, and thereby prevent the danger of its rupture; the venous blood of the chylopoietic viscera seems well adapted for this mechanical purpose.

Again, how is the circulation in the fœtal liver to be accounted for, the principal part of which is *arterial* blood from the umbilical vein? The answer to this question is founded upon a fact, that secreting glands act in proportion to the demand of the constitution for the secreted liquor: the salivary glands, for instance, pour out an immense quantity of saliva during the stimulus of mastication, but very little at other times, when not excited to action. The liver of the fœtus secretes but little bile, perhaps no more than the gall-bladder will contain for the digestion of the first food; the secreting function of the liver, therefore, seems to be suspended in this state of animal existence; and whether it be *venous* or *arterial* blood that circulates, is in this case of no moment; but as soon as the child is born, or rather as soon as food is taken, the secreting function of the liver is excited to form bile for its digestion; this gland must then, that is, at birth, be perfect in its structure. The increased size of the liver of an infant, in proportion to some other glands, indicates also its early importance. The principal use of the blood of this vein passing through the liver, appears to me to act partly mechanically, in keeping the vessels of the liver distended during their formation, that is, by its pressure against their sides, contributing thus to their formation of a due size or capacity. The arterial quality may also assist the hepatic artery in the nourishment of so large a viscus, and in that way contribute also to its structure. It is also necessarily, for the most part arterial, be-

cause little other can pass through the liver either from the mesenteric or emulgent veins, for no food is taken, and little or no urine is secreted before birth. The ramifications of this vein do not become obliterated after birth, when the vein itself does, but continue to grow, and actually become branches of the vena portarum.

In the adult of the human species, where food is taken after certain intervals, (during health) it is probable that less bile is secreted, in such interval, than when chyme is passing the pylorus.

The distribution of the arteries of the abdominal viscera demands particular attention, and when duly considered, will perhaps be found to favour this hypothesis. The cæliac, the superior and inferior mesenteric arteries, are three azygic branches, principally destined for the abdominal viscera. The first, or cæliac, almost immediately divides itself into three trunks or branches; the first of which is distributed to the stomach, called the coronary artery; the second, or splenica, to the spleen; and the third, or hepatica, to the liver. Either of these three branches being excited to increased action must affect the other two, in consequence of being connected by the cæliac, which is equal in capacity to the sum of the three said branches; had each branch been sent off immediately from the aorta, without the intervention of the cæliac, the excitement of one would not have affected the other.

I shall conclude this Inquiry with what appears to me to be the economy of Nature in the process of digestion. As soon as food, mixed with saliva, is received into the stomach, after abstinence, the coronary artery becomes stimulated to supply that viscus with blood, for the secretion of the gastric liquor; the cæliac at the same time partakes of the stimulus, and sends an increased quantity through the splenica to the spleen; and through the hepatica to the liver. This extra quantity sent to the liver is not supposed to be destined for the secretion of bile, but for the purpose of occasionally invigorating the secreting organic structure of the liver: this action, at the same time, elicits the *arterial* blood from the spleen (previously sent by the splenic artery) for the secretion of bile. At this time the first digested portion of food is about to pass into the duodenum, which is another source of stimulus for the liver to exercise its secreting function, the first portion being probably supplied by the gall bladder.

I am, &c.

JOHN DAWES,

Member of the Royal College of Surgeons in London.

Birmingham, Sept. 14, 1807.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ON the 2d of December last I was requested by my father to see the child of Mr. L. I learnt, that it was born on the 28th of November; to outward appearance, a well formed, healthy female. On the 30th, it began to shew signs of considerable uneasiness, with some tension of the abdomen, and a constant and increasing inclination to stool. This being attributed by the attendants to a retention of the meconium, a little manna was administered, but immediately rejected, and it refused to take the breast. The next day my father saw it; the symptoms were aggravated, the abdomen more tense, violent straining, occasionally followed by a vomiting of bilious and stercoracious matter. As he did not suspect the real cause, a little Castor oil was ordered, and directions given for the use of the warm bath. These seeming only to exasperate the symptoms, glysters were about to be had recourse to, when it was immediately discovered that the cause of the disorder was an imperforate rectum.

Upon examination, I found that the anus was completely formed, as were the urinary organs, the child having passed its urine naturally from the beginning. On attempting to introduce a bougie, it met with a firm resistance, about half an inch, or a little more, within the anus; and although one of the smallest was used, no opening could be found. The child appeared to be very much exhausted, uttered a faint moaning cry, and was becoming comatose; much tension of the abdomen, and other signs of peritoneal inflammation. It was immediately determined that a puncture should be made.

The canula of a moderate sized trochar was introduced, and held firmly against the resisting part; then passing the stilette (which was triangular at the point, according to the old fashion) along the canula, till the resistance was felt, I pushed it home with a quick motion, so that it should enter just so far as it projected beyond the canula; the stilette being withdrawn, the canula passed easily onward, and thickened meconium was discharged.

As it seemed to impede rather than assist in the evacuation, the canula was soon withdrawn, and nothing ordered but a repetition of the warm bath. All the disagreeable symptoms subsided beyond the most sanguine expectation. The bougie was used within twelve hours after the operation, and its use was persisted in for two or three days

days, but afterwards discontinued, at the earnest reques of the mother and attendants. The child improved rapidly in appearance, took kindly to the breast, and continued to pass its fæces regularly to the seventh day, when the evacuation suddenly ceased, and all the unpleasant symptoms returned, with vomiting and tension of the abdomen. The resistance to the passage of the bougie was as strong as ever; and although a considerable degree of force was exerted, the opening could not be restored. A few hours were given for the accumulation of fæces behind the stricture, when the operation was performed in the same manner as before, and followed by a sudden and forcible discharge of liquid fæces.

I now took upon me the management of the case, and used the bougie twice a day for the first week, and afterwards once a day, gradually increasing the size of the instrument till little or no appearance of stricture remained. The child was improving the while in health and strength; no medicine was required, except now and then a little mistura cretæ to check the inclination to diarrhœa, and remove acidity. It soon became remarkable for its size and forwardness, beyond what the lady's former children had been; and to my repeated inquiries the answer always was, that every thing went on well; and I began to consider the cure complete.

On the 12th of August, eight months from the time of the operation, I was sent for to see it again, when I found that the rectum had contracted, so as scarcely to admit a common sized urethra bougie. I now also learnt, that since the child had passed a figured stool, it was observed to be flat, like a piece of tape, constantly getting less, and always passed with violent straining. But supposing that all would yet be well, they had neglected to apply for assistance. The use of the bougie was resumed; to this it gradually yielded, and a solid stool now passes with little more than the natural effort, and I shall continue it till the stricture is entirely lost; taking care, for some time to come, to have ocular demonstration of the size and figure of the child's fæces.

The stricture is now nearly an inch within the anus.

A case of malformation of these parts seldom happens so favourable for surgical treatment; and as I have no opportunity at present of consulting any author who gives a detailed description of its treatment, I should be glad to know of any of your Correspondents, who may have had opportunity of observing, how long the disposition to contract is likely to continue. I am, &c.

Pulborough, Aug. 31, 1897. P. J. MARTIN.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

DID I not perceive that your Journal is open to the young and the anonymous, as well as to the titled veterans in practice, and that the cursory remark, the individual opinion, or the speculative suggestion, are not entirely excluded by the laboured essay or finished detail, I should not have appropriated a moment of your time to the perusal of these pages. But this consideration, aided by my natural *cacoethes scribendi,* acts so powerfully upon my will, at this moment, that the consequence is—that I must write a letter to the Editors of the Medical and Physical Journal. This determination, I will frankly confess, is not the result of a conviction, that any knowledge which I possess, were it all communicated, could either instruct the ignorant, or confirm the opinion wavering between some controverted points in practice. But I am no convert to the well-known maxim "Vir sapit qui pauca loquitur: on the contrary, I conceive that the man who delivers his opinion upon every subject, who conceals not any remark he has made, however trivial, is of infinitely more advantage to society and to science (be his attainments ever so small) than the phlegmatic sons of solemn taciturnity, who hug themselves in the belief that they are acquainted with something of which the world is ignorant, and hoard up with miserly care the precious treasure: a conduct, which, though it is sometimes the attendant of real knowledge, is generally the badge of ignorance and a narrow mind. In our profession, in particular, which can never be perfected by solitary study or abstract reasoning, but by the accumulation of experience, the disclosure of every fact or observation relative to practice (avoiding the repetition of what every one knows) must be of consequence; and can, *at the worst,* add but additional support to facts which cannot be too well known. With this disposition, I have resolved to communicate to you, at any time, whatever circumstance comes under my observation, which may in the smallest degree tend to the benefit of the profession; and I may add, that I have full opportunities of attending to a particular department of medicine, which is of the utmost importance, and which, notwithstanding the exertions of some late eminent writers, is not too well known; I mean Naval Practice. I hope you will not consider it as derogating from my credit, when I inform you that I am but a young practitioner.

 However

However, if one takes the trouble to observe and to think, any striking appearance, or any deviation from the laws that are laid down by the great oracles of physic, is more apt to make an impression on the young mind, than on the old practitioner, whose curiosity is blunted, and who has insensibly fallen into a routine of practice, fatal to exertion and improvement; an effect which we see produced *every day*.—So much for introduction.

From my short residence in my present situation I have seen little new, and I shall only detain you at present, by requiring the opinion of some of your Correspondents, on a case which, though perhaps not very singular or interesting to the medical world, is of the utmost importance to the suffering individual.

A seaman, of about forty years of age, of a robust habit and athletic form, about two weeks ago, complained of *pain of breast*. Upon examination, the temperature of his skin was found considerably above the natural standard, his pulse extremely full, and upwards of 90. The place he pointed to, seemed higher up than is commonly the case in pulmonic inflammation; and upon removing his clothes a small tumour was discovered just above the clavicle, where it joins with the sternum; it felt circumscribed, about the size of half a large hazle-nut, distinguishable to the eye only by its strong pulsation, and indeed so strong as if to elevate the pressed finger along with it upon the stroke of the pulse. It communicated a peculiar sensation to the finger, a kind of *hissing* feel, if such an expression could be used; or as if a large body of fluid were pressed upon a small orifice. Nothing more appeared in the case deserving attention. The anterior branch of the temporal artery on the right side (where the tumor is situated), gave a much less pulsation than that of the left, and any difference of force in the radial arteries at the wrists was imperceptible. *He attributes it to a bag of bread that was thrown on his head and forced it towards the left shoulder, about a month ago.* Is this an aneurism of the carotid artery? and how is it to be treated? The man was discharged to his duty, where he still continues, and complains of little uneasiness from his neck. His arterial system still continues in the same apparently increased action; but whether this be the effect of idiosyncrasy or disease, I cannot determine.

Yours, &c.

F. G.

His Majesty's Ship ———————.
Plymouth, Sept. 10, 1807.

Observations on the Use of Nitric Acid in Hepatitis, in a Letter to Dr. Coxe. By S. Ffirth, M. D.

Sir,

THAT hepatitis is a frequent and troublesome disease in the East-Indies, is a fact long known; that mercury is almost a specific for the cure thereof, is also equally well known; but practitioners are fully aware that cases have, do, and may again occur, in which it would be improper to use this " Sampson of the materia medica;" and that, owing to the prejudices of patients, it cannot sometimes be administered, when no other impediment to its use exists. It becomes therefore of consequence to be acquainted with other articles that may be equally efficacious to exhibit in these cases. Of the numerous articles which have been tried, none have evinced such powers as the nitric acid, and none performed such wonderful cures. The attention of medical men were called to this subject some years ago, by Dr. Scott, an eminent practitioner at Bombay; but I do not think that his representations met with the attention which they so deservedly merited. I am convinced good nitric acid is one of the most valuable articles of the materia medica, and may be used with great advantage in *almost every* disease in which *mercury* is now given; and owing to its great tonic powers, it can be used in cases where the debility is so great as to forbid the use of the latter; and in hot climates, where great debility attends every disease, this virtue renders it the most valuable article the physician can prescribe. In cases of hepatitis, where the patient has a scorbutic habit of body, (and these cases are frequent amongst seamen in long voyages) the nitric acid can alone be used with success. It should be of the best kind, as I have found the common aqua fortis of the shops not to answer so well on several accounts, and it always contains a portion of muriatic acid, which is injurious in these cases. At first it should be given in small doses, frequently repeated, and largely diluted with water, and the dose gradually enlarged, as circumstances may indicate the necssity thereof. After continuing the use of it for some time, the mouth becomes affected, the salivary glands enlarge, their secretion is increased, the gums swell, become sore, and a disagreeable taste is complained of, a slight degree of fætor is produced, but very different from that which is occasioned by the preparations of mercury—the pain of the

the side abates, and gradually becomes less troublesome, until it is felt no more, the pain in the shoulder subsides, the enlargement of the liver, which had previously taken place, ceases to proceed; it soon decreases to its natural size, and with it the nausea, oppression, and all the other disagreeable symptoms; the patient improves in health and strength continually, and from being debilitated, infirm, and wretched, becomes healthy, vigorous, and cheerful. The ptyalism produced is not so disagreeable as that arising from mercury, and is never followed by pains in the limbs; neither does it induce a predisposition to rheumatism, as many contend mercury does. It at the same time cures the scorbutic habit the patient had contracted; but if the scurvy had broken out, and made much progress, it will not effect a cure: the most that can be expected in these cases is, the cure of the hepatitis, and the preventing the farther advance of the other symptoms, which can alone be cured by limes, lemons, and oranges, or by living on fresh provisions. But, certainly, to cure hepatitis in a scorbutic patient by nitric acid, is doing a great deal; mercury, in such a case, would only increase the symptoms, and hasten the fatal termination thereof. I have used the nitric acid with the happiest success in a number of cases, one of which I will relate.

William Woods, a seaman of the China, had an attack of the malignant fever soon after the ship left Batavia, of which he recovered, but continued very weak and feeble for a considerable length of time. During the passage between Balambuan and St. Helena, he complained of pain in his side, pain in the right shoulder, sometimes in the clavicle, sometimes in the scapula; he felt a sense of weight, and "dragging," as he expressed it, whenever he lay on his left side. Upon examination I found the liver *very much enlarged*, occupying a large part of the abdomen, and painful when pressed. The man was much debilitated, had night sweats, very feeble and quick pulse, flushed cheeks, or rather a circumscribed spot on each cheek, such as usually is seen in hectic fever; he complained of pains in his limbs, had a scorbutic eruption on his lower extremities, with purple spots on some parts of his body. I thought the case desperate, but determined to do all in my power to give him relief; and, upon considering his case maturely, thought nothing promised so fair to do this as the nitric acid. I accordingly prescribed a drachm of it to be diluted in a quart of water, and taken in the course of the day; the second day he took a drachm

and

and a half in three pints of water; the third day, two drachms, as he had borne the first increase of the medicine very well. It was very grateful to his taste, and allayed his thirst. I continued at two drachms for four days, when it was increased to two and a half, diluted with three quarts of water, and taken for his constant drink through the day and night. In this manner the dose was increased to half an ounce in the course of three weeks, beyond which I did not increase it. His strength increased, his appetite returned, his scorbutic habit was almost gone, the medicine began to affect the gums, and at the end of the fourth week the pain in the shoulder had greatly diminished, and was not troublesome; the liver appeared to be decreased in size: he was in good spirits, spat freely, and said he could lie on his left side without experiencing so much uneasiness. From this time the diseased liver gradually diminished in size, his health and strength returned, and after continuing the medicine nine weeks, he was discharged, perfectly cured.

I could add several other cases in which it was equally efficacious in curing the disease, but it is unecessary; suffice it to say, that I have never failed with it, although I have no doubt that cases may occur in which it will not succeed, particularly where *very extensive suppuration* has already taken place, or where suppuration, combined with *scurvy,* in a very considerable degree, exists; but in these cases no medicines will effect a cure at sea; and even if the patient is on shore, and has fresh animal and vegetable food, his chance of recovery is *very small.*

With respect to the modus operandi of nitric acid, I must say I am doubtful. It is a tonic, every person must admit; that it is a stimulant, none can deny. It salivates; so in some instances does copper and oxygenated muriatic acid: so does the best acetic acid; so will opium, cicuta, hyosciamus niger, &c. when given to a certain extent. In this they all *appear to approach somewhat* towards the nature of mercury; yet every one admits them to be very different. Acids contain oxygen, mercury is only active in proportion to the quantity thereof that exists in its different preparations. But do opium and hemlock also contain oxygen? If not, does salivation depend upon oxygen in certain cases, and not in others? It certainly must depend upon *something* in common to all articles that salivate. We know that seneka polygala, and several other powerful stimuli, will produce ptyalism. No person will

contend,

contend, that seneka contains oxygen; but if we view the action of all these medicines, we shall find they have one thing in common, that is, they are all powerful incitants; but it may be asked, if ptyalism depends upon an incitant action, why do not all articles of that class salivate? Perhaps it may be owing to a *peculiar* stimulating power possessed by these articles, and not by the others. What is this peculiar power? I do not know; that it is *not* oxygen, I believe; but what it is I cannot pretend to say. There are many things which we know, but cannot explain. What is matter?—What is excitability?—What is life? We know all these to be; but where is there a philosopher can say in what they consist? So in like manner with the salivating principle: we know it is something: we know it must be possessed in common by several articles *apparently very different*; but what it is, as I have said in the beginning of this discussion, *I am uncertain.* I hope some of your learned correspondents will solve my doubts. With this view I submit them to the public.

History of the Case of a very extensive Burn—successfully treated according to Mr. Kentish's method. By Dr. Coxe, of Philadelphia.

THE following case is so strongly in favour of Mr. Kentish's plan for the treatment of burns, that I feel assured its diffusion will be productive of advantage.

Anne M'Quicker, five years of age, living with Mr. Robert Smith, No. 28, South Second-street.- On the 11th of January of the present year, her clothes, which were of thin callico, (a miserable dress for the inclement season), took fire whilst she was sitting by the stove, and were nearly burnt off her back. The child ran in great agony into the street, in the midst of the snow; and by the endeavours of some to put out the flames, the clothes were stript off her; carrying with the cinders, the cuticle and skin in some places, to an extent of surface, whose circumference, *five feet* in length of string, would barely surround. She was taken into a neighbour's house, almost in a state of nakedness, and a most miserable spectacle, arising from the mixture of blood and half-burnt tinder, &c. adhering to this extensive injured surface.

A medical gentleman, then in the neighbourhood, recommended the application of cold milk to the burn, and laudanum

laudanum to be used internally. As no advantage was derived from this, and as the child suffered the most violent pain, I was requested to see her, as I happened to be at one of the neighbours. Uncertain of meeting with the gentleman who had previously prescribed for the child, and anxious, if possible, to afford her some relief, I concluded to go, and found her, even worse than had been represented. She was suffering under one of the most violent chilly fits I ever witnessed, which seemed as if it would carry her off; and the pain of the burn appeared to be absorbed in the superior suffering from the chill; for she exclaimed continually (whilst her teeth were violently chattering in her head), "cover me! cover me!"—The burn extended from the right axilla to below the great trochanter of the same side—over the right clavicle and breast, and beyond the sternum in some parts, over the abdomen beyond the linea alba and the upper parts of the pudenda—backwards it extended to the spine, nearly in a straight line down—and the greater portion of the inferior part of the arm was either raw or in blisters. The fire had extended its influence considerably beyond the boundary of the sore, as was evident from the erysipelatous blush, and from several small blisters scattered here and there.

It appeared scarcely possible that so young a child should survive so extensive a wound; and even if the first violence of the injury was overcome, it remained doubtful if the copious suppuration would not be greater than she could support. Nevertheless, I felt persuaded that nothing could save her but the plan proposed by Mr. Kentish; and I ordered immediately the spirits of turpentine on rags to the whole surface of the sore. From the hurry, I neglected to have it warmed, which would probably have aided in sooner removing the chill. In the mean time she took thirty drops of laudanum, and the rags were kept constantly wet till the liniment was prepared, as a permanent application. The laudanum was repeated, as the chill did not entirely subside, and the pain continued violent several hours. She was directed the use of wine and water to drink; and the liniment was applied anew at bed-time, with some more laudanum; which relieved her, but did not prevent a restless night.

The following day (the 12th) the pain, though great, was much alleviated, and the liniment was continued with occasional doses of laudanum. She complained of great difficulty of swallowing, which was ascribed to the flame having

having been drawn into the fauces. 13th. Symptoms the same; slight appearance of suppuration; the blackness of the sore is now chiefly removed, by the tinder, &c. adhering to the ointment, and coming away with the dressing. On the 14th, suppuration commenced, and became daily more copious; she was ordered laxative medicines, and put on a strict diet. One part was conspicuous, of about five or six inches diameter, on the lower part of the abdomen, bounded by the pubes, the linea alba, the ilium, and a line from thence to the navel, which seems to be so much destroyed that a deep slough may probably come away. As suppuration was now well advanced, I applied, about the 16th, Turner's cerate, chiefly as an estimate of the value of either application in such an extensive burn. The result was, the child was worse all day and night, with additional fever and pain, and considerable alteration in the healthy aspect of the sore. The liniment consequently was re-applied, with great relief: her bowels were moved with senna and manna, and by the next day things were as favourable as before.

20th. Pain still very considerable, from the great extent of the sore, which precludes the smallest motion without rubbing some part of it. She is obliged to be lifted bodily out of bed, in order to be dressed, which causes much pain. as she is forced to stand the whole time. The suppuration became now very copious; I therefore again tried Turner's cerate, and finely levigated; but the alteration for the worse in twenty-fours was so great, that I was in no hurry to renew the trial. The turpentine liniment again restored its healthy state.

During all this time she was very strictly dieted, and so highly excitable was her system, that from foolishly giving her a small piece of a chicken, for dinner, which she thought she could eat, a violent degree of fever took place, which kept her restless and uneasy all night, with augmented pain of sore: and when dressed in the morning, in place of fine healthy granulations and suppuration, an ugly ill-conditioned ulcer, with sanious discharges, presented itself to view. Purging and close attention to diet, once more, in a short time, overcame this, and the edges were rapidly cicatrizing.

It was now thought advisable to get her into the hospital, as from the extent of sore, it was presumed it would take a great while to heal; and she was admitted January the 31st. In a short time it became necessary to prescribe the bark in decoction, with jellies, &c. Serpentaria also, and

other remedies calculated for the debilitated state of her stomach, were employed, by which she recruited; the sore healed rapidly under the use of Turner's cerate, so that by the middle of March it was not larger than the palms of both hands, and confined to that part which I have stated, as being most injured by the fire. A solution of white vitriol at this time hastened its cicatrization; and on the 11th of May she was discharged cured. Had she not accustomed herself to pick the sore, it probably would have been well two or three weeks sooner; as for four or five weeks previous to this, it had not been more than from two to three inches in diameter. On measuring the circumference of the cicatrix before she left the hospital, it required a string of *four feet six inches* to surround it. I have observed, that five would not have surrounded the extent of the injury sustained, in the first instance, especially if that of the arm is included, which in the present measurement is not adverted to.

The above instance, if I had any doubts before of the efficacy of Mr. Kentish's plan of treating burns, would have completely silenced them; and it gives me pleasure to add, that the physician who first prescribed for the patient, and who had had frequent opportunity of seeing very extensive injuries from burns and scalds, on the large plantations of some of the West-India islands, was beyond measure gratified at the powerful and rapid effects of the plan pursued above, which he said he should have been fearful of using, had he not been convinced of its mildness and utility by so striking an example.

Philadelphia, July 1, 1805.

Case of a still-born Child restored to Life. By J. C. ROUSSEAU, M. D. of Philadelphia.

ON the 21st of March last, I was desired to attend Mrs. O****, come to the full time of her pregnancy. Her labour began with a violent flooding, which being, by proper means, stopped, every thing progressed regularly.

The head of the child having at last engaged in the pelvis, and beginning to make its appearance at the os externum, I gave her hopes of a prompt delivery; upon which she informed me, that she had never been, in any previ-

ous

ous labour, delivered in bed; and it was her wish to, and she immediately did, place herself kneeling down at the foot of the bed.

Her labour being quick, the child was soon born, and as I suspected from the flooding, without any sign of life. I had hardly any time to turn the child in my hands, when, without any warning, she jumped into her bed, leaving a lifeless child in my hands, with its placenta pulled out upon the floor.

My feelings upon this embarrassing occasion may be more easily felt than described. The mother had the first right to my cares; the child's life was in the utmost danger: there was no alternative. I went to the mother, after having delivered up the child to an assistant; and, at the same time called for warm water, which fortunately was at hand. Finding no flooding, and every thing in a fair way with the mother, I returned immediately to the child.

It gave no sign of life; but finding the pulsation strong in the cord, and persuaded, as I have always been, that an organic life exists a long time after birth, between the child and placenta, even when detached from the uterus, I immersed both child and placenta in a tub of warm water, and then stooping over the child, and placing one of my hands on his back, and the other on its breast, I enclosed his nose and mouth in mine, began to inflate its lungs, and expel the air alternately by the pressure of my hands.

I continued this operation for three quarters of an hour, before the child exhibited any signs of life, stopping now and then to observe whether I could perceive any natural motion of the thorax. It was not long after, when the thorax began to move, and the child inspired once. About half a minute elapsed between the first and second inspiration. This interrupted life, if I may so call it, lasted better than a quarter of an hour, during which time I stimulated the nose and fauces of the child. The respiration becoming quicker and quicker, I began to stop gradually by pressure of my finger on the cord, the pulsation that was still very strong, and in a short time I separated the child from the placenta, and had the satisfaction to see both mother and child perfectly free from danger.

This child is now as hearty and robust as any other child of its age, appearing to have received no injury from such an uncommon entrance into life.

July 29, 1805.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

JAMES BLAKE, a seaman, aged 28, when up at the mast-head, assisting in furling the royals, fell; in consequence of which he fractured his scapula, tibia, and fibula. On being carried into the sick bay, the fractures being reduced, he was bled, and had an opiate; his pulse all this time was very full, nor did it undergo the least change by bleeding. The accident happened about six o'clock: I saw him afterwards at nine; at that time his pulse was rather more regular; he was perfectly in his senses, had not much fever, and appearances promised a speedy cure. About eleven o'clock, when one of the attendants went to see if he wanted any thing, he was found dead. On examination after death, nothing was discovered that could in the least degree have caused his death, except an extravasation about the fifth vertebra; his death must have been occasioned, in my opinion, by a compression of the medulla spinalis. No paralysis of the lower extremities was observed; on the contrary, when reducing the fracture, he complained of pain: and on my examining the fractured limb, at nine o'clock, I felt a considerable degree of warmth.

I am, &c.

W. WARNOCK,
Assistant Surgeon H. M. Ship Saturn.

March 21, 1807.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

FROM a long observance of your impartiality in the admission of papers of controversial Correspondents, I cannot doubt of a similar indulgence being extended to myself; while I hastily run over the observations so indignantly applied to me in your Number of this month.

My object in adverting to a demonstration of the brain, in a paper which I lately submitted to your notice, was not contention; neither did it arise, as suggested by my opponent, out of the fulness of spleen. It is evidently, however, this part of my paper that has so aroused Moromastix,

mastix, and which claims therefore a priority of attention from me.

From facts contained in this wrathful ebullition against me, as well as from the indignity of its manner, I cannot but know that it originates at least with the party, whose accuracy I dared (to my great peril seemingly) to call in question. Notwithstanding which, and though I am well able to prove that this dissection, as it respects the brain, was not conducted on the principles of scientific anatomy, yet I shall reserve to myself the privilege of withholding for the present, the particulars of a subject, to disclose which would be but little satisfactory to myself, and would afford, I should fear, still less interest to your various readers; though in a collection like yours, "it surely is a legitimate object of discussion;" and if further urged to it by the indignant contumely of my opponent, I shall not be afraid to offer some facts, which in strictness ought to be appended to this "admirably performed dissection." Nor can I now quit the subject of it altogether, without noticing and doing away some of that misrepresentation which so wilfully abounds in every part of Moromastix's paper. We are told in the first place, "that many medical men of Derby, and its vicinity, attended this admirably performed dissection." Now, from the vicinity, I happened to be the only practitioner that attended; and the town of Derby furnished, besides our operator, two others only, and a resident physician, of character and respectability that would contemn my humble praise. I speak to the day only, on which the brain was the subject of demonstration. With the gentleman who conducted the dissection, I never had any personal intercourse; but I have already acknowledged him of unquestionable respectability, which I felt myself bound to, knowing the opportunities that have been afforded him of medical research. How liberally I am requited. With what profundity, and with what goodness of intention, does Moromastix observe, that, "if a pupil has not attended to his instructions, and profited by them, the fault is not in the Teacher." Greatness of thought! With what propriety I might retort on my opponent this implied censure, is with me no question.

Further, we are led to suppose, that this assemblage of medical men was formed, merely "to see the state of the brain in a person," as he strongly expresses it, "destroyed by hanging." Not, you will observe, to have it generally and scientifically displayed before them, but cooly to

to express a desire, simply to see its condition in a person so expiring. Or, in other words, we dispense with an indiscriminating havock of a structure, wonderful in its parts, and admirable in its combinations, to see merely, we suppose he means, its turgent or actually ruptured vessels. Is then Moromastix so antiquated in his opinion on this subject, as to suppose that these miserable sufferers die by the intervention of apoplexy, or that the brain is primarily affected, and is the organ to look to, as accounting in its appearance for all the convulsive struggles and final close of strangulation? "No detailed demonstration," it is continued, "was attempted or given." Now I do contend, without fear of contradiction, that a detailed demonstration was "attempted," though not, I confess, happily "given."

That I have occasionally awkward feelings about me, arising out of conscious professional inferiority, Moromastix, from premises before him, ventures to assert; nor will I controvert him in so happy a position, whose "intellectual eminence," so conspicuous on this occasion, I am obliged feelingly to acknowledge, and whose own reflections, no doubt, arising out of this and other medical rencounters, are all "solacing and triumphant."

By way, I suppose, of dividing our attention, we are told of drawings totally unconnected with the present question; and are reminded of the ingenuity of a gentleman, which no body, knowing his character, could doubt. I am however doubtful, how far ingenuity itself could give us a profitable display of the progressive stages of the operation for aneurism; I hope the knife of the anatomist was not too busy on this occasion; I hope it did not much distort the parts from their "natural position," in preparing them for the pencil.

We dismiss then, for the present, this brainular topic, and proceed to another point of attack, Infantile Diseases.

In my brief mention of infantile diseases, such as were at that time principally prevailing, it is hardly necessary for me to say, that it was no part of my intention to hold out a fresh or recommendatory view of them to medical practitioners. Surely, Moromastix himself, in the fulness of his animosity, could not so ridiculously depict me in his own mind, as he has attempted to do in his paper, going over, in the compass of a few lines, "the copious subject of infantile diseases." The attempt, as indeed the very face of it will shew, was nothing more than to fix a comparison, as far as my observation enabled me to do it,

 between

between the success of medicinal agency, as it regards these little sufferers, in town and in the country; to which I was led by the following emphatic sentence from the pen of a Reporter, then respectfully alluded to. "More infant subjects in this metropolis," says he, "are diurnally destroyed by the mortar and pestle, than in the ancient Bethlehem fell victims in one day to the Herodian massacre." A fact, surely, that merits the consideration of every medical man, and which will be long, I hope, in being appropriately applicable to provincial practice.

The other point, on which Moromastix so impetuously assails me, is, on a case of amputation. The observations which I submitted on this case, are, I hope, in the spirit of candour and liberality, beyond which I set up no pretence for them. By what means does Moromastix endeavour to depreciate them? Not by the force of argument, but by the power of ridicule; the shafts of which, however, are but ill directed towards a subject so seriously important, and so confessedly difficult in its developement.

Our inimitable Disputant, in the ardency of his zeal, takes up the case at a period more early than what I ever adverted to; and talks, but does not shew, the necessity of waiting for the anastomosing branches to dilate before you would proceed to the operation of aneurism. It is not now customary I think, long, if at all, to delay this operation, with the view of allowing the anastomosing branches time to dilate. We cannot, indeed, always determine that such dilatation is going on, even in the advanced periods of the disease; for it is a process we can neither accurately judge of, nor controul; and to protract the operation on that account only, is not acting according to those enlarged views, or that mass of most respectable experience now daily teeming in upon us from the press. Suppose an open wound happening to the femoral artery, Moromastix, this Colossus in surgery, would watch over it, in trembling anxiety, for the collateral arteries to dilate, before he would dare to put a ligature round the main trunk.

It would answer, I fear, but little purpose, closely to trace the steps of Moromastix through all that palpable misrepresentation and abusive epithet, so particularly observable in this part of his paper, and which bury in their exuberance, every argument, if any such originally were. Instead therefore of pursuing so unprofitable a track, let us bring this question to an end by supposing a case.—

Imagine

Imagine a patient laying before you, " in a state of complete deliquium animi;" you perceive, without previous question, that this death-like appearance originates in hæmorrhage; you hastily make yourself acquainted with the former history of the patient; you learn the source of this bleeding, and are told also, " that after the most severe pressure which possibly could be made, (by the tourniquet) he lost some blood;" you conclude, therefore, that its present cessation is more owing to the quiescence of the heart and arteries than to the pressure of the tourniquet, which we will suppose still grasping the limb; you know, from previous circumstances, that this hæmorrhage could not be in a direct line from the main trunk,—an important fact; and you know also, that it filters through a diseased or sloughy surface, through " a mass of corruption," in which condition of parts it would be in vain to look out for the bleeding orifice; and as the patient revives, you apprehend a return of hæmorrhage, which, in ever so small a degree, you have reason to think would prove fatal. Such a case, it must be allowed, would require promptness of decision, and would be variously encountered perhaps by different surgeons; in the headmost rank of which, if not for ingenuity of practice, at least for novelty of opinion, stands Moromastix, who, it seems, would have "amputated the limb, as the only chance of saving it." Rather than have amputated a thigh in such a precarious state of the patient, I hope there is nothing radically wrong in having suggested, " That we would have dilated the cyst if it required it, and would have crammed it with compresses of sponge; and with the help of a bandage, or other means, would have kept up a necessary resistance to the bleeding point or surface." If success could not be promised from such practice, does it become on that account only, less rational? And would it not be advisable to hazard every reasonable expedient, rather than to hurry, by the horrors of mutilation, a destined sufferer to his grave.

This kind of procedure, "as applicable to such a case," is called by Moromastix, somewhat in the spirit of tautology, " preposterous nonsense." And again, " what bombast." Epithets of this sort, we would remind him, are easy of selection, and may be applied by almost any ignoramus, in the way of ridicule or degradation, to the most serious and important topics. It must be something, however, a little more argumentative that brings conviction to my mind, or that makes me to think that " a state

 of

of complete deliquium animi," from whatever cause arising, is the moment for the introduction of the parade of amputation; or rather, I should say, the moment for actual operation.

A PRACTITIONER IN DE[illegible]SHIRE.

August 26, 1807.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

MANY instances of the Small-pox occurring a second time in the same person, have of late been published, and authenticated as well as any medical facts can be. In addition to those which I have already given in your Journal, and in my other publications, I now beg leave to state the following.

A son of the late Henry Elliston, Esq. of Whitehaven, was inoculated with the small-pox by a surgeon at Egremont, and had a good crop; nevertheless, I am assured by a lady of great respectability, that he has since been attacked again with the disorder, and had it severely.

I have lately seen a letter from Mr. Shrapnell, surgeon of the South Glocester Militia, to Dr. Jenner, in which he relates several instances of a similar kind; particularly one which occurred in the wife of John Alder, a musician in the regiment, who had the small-pox twice, and was blind with it both times.

Mr. Shrapnell observes, that the occurrence of the small-pox a second time is no new idea: John of Gaddeston, physician to Edward the First, says, in his Rosa Anglica, *Homo variolatur bis.*

The following case was communicated to me by Mrs. Stone, housekeeper to Viscount Templetown. Susannah Piper, of Sudycamps, Cambridgeshire, had the small-pox by inoculation; and was blind three days. She some years afterwards nursed Mrs. Stone, who is her sister, and her brother, when under inoculation; in consequence of which she again had a considerable eruption of the small-pox in all parts of the body; and was in all respects more ill than either of the patients whom she attended.

Mrs. Quartermain, 13, Salisbury Place, had the small-pox 26 years ago. She was blind, and so ill that she was given

given over by two medical men. Four years ago, when nursing her daughter in the disease, she had an eruption of about fifty pustules, with great constitutional indisposition for several days. She had violent sickness, pain in her head and back; and every other symptom that commonly attends the disorder.

Ann T[illegible]hurst, late servant to Mr. Courtenay, of Lincoln's Inn Fields, was inoculated by Mr. Watts, of Cranbrook. Her arm rose; she was very ill, and had eruptions. Thirteen years after, she nursed her brother's children in the small-pox; in consequence of which she caught the disorder again. She had a head-ach, sickness and fever; followed by so considerable an eruption, that people were terrified, and ran from her, when they met her in the street.

Mrs. Palmer, No. 25, Green Walk, Surry Road, many years after she had had the small-pox, nursed a child of the Honourable Robert Anstruther, when labouring under that disorder; in consequence of which, she had about forty pustules on her breast and shoulder. She was sick, feverish, and had a pain in her head. She was at Mr. Batsford's in Brunswick Place, when I went with the Rev. Mr. Hill to see the case of failure in his family; and she declared, that she had the disorder a second time much more severely than Mr. Batsford's child had it after vaccination.

Mrs. Martin, No. 6, Brunswick Place, was inoculated for the small-pox by Mr. Read, of Portshead, near Bristol; and had a heavy crop. Six years after, she was in the house where the disorder was; in consequence of which she again caught the disease; and had eight or nine hundred pustules, attended with all the symptoms that usually attend the natural small-pox. The pustules began to turn on the seventh day.

The Editors of the Bibliotheque Britannique, in the 28th vol. of that work, p. 64, assent to the truth of this opinion, in the following words: "It is well known, that it is possible to have the small-pox twice; as a great number of respectable authors attest."

Since most of the preceding remarks were written, your Journal for September has appeared; in which Mr. Davies, of Piccadilly, expresses his opinion, that *de mortuis nil nisi bonum* is a good motto; I beg leave, however, to express my opinion, that *de mortuis nil nisi verum* is a better.

I am ready to admit, that the work of a deceased author

 should

should be suffered to rest in peace, unless it can be shewn, that justice to the living, and to posterity, demands an investigation of its contents. I also admit, that in the course of such investigation every man ought to be cool and temperate; if, therefore, in continuing my inquiry into the truth of Dr. Rowley's publication, I should be betrayed into an improper warmth by the mis-representations which it contains, I trust, the editors, in their wisdom, will expunge the passage.

The Royal College of Physicians have done much towards dispelling the doubts of the public; but I am assured from various quarters, that the unfavourable cases which have been published still have great weight with the multitude, whom it is our duty to undeceive. The remaining cases, in the pamphlet alluded to, which I shall deem it neccssary to refute, are not numerous; and I hope no reader of your Journal will have reason to complain of the space which this refutation will occupy.

Two children of Mr. Colbeck, No. 3, Portland Street, Soho, are stated by Dr. Rowley to have had the small-pox after the cow-pock; but Mr. and Mrs. Colbeck assured me, that the eruption first appeared in the form of blisters, and was supposed to be the chicken-pox.

In several of the other cases of pretended failure, which I have inquired into, the second disorder was the same as in the preceding instance; in some the patients were previously infected, and in others, the subsequent small-pox was merely local.

The child of John Meredith, of Kensington, who died of the small-pox, is stated by Dr. Rowley to have been vaccinated in Great Castle Street, Oxford Market; he was, however inoculated in Castle Street, Leicester Square; and I have already proved in your Journal, that he did not go through vaccination in a regular way, the pustules being destroyed at an early period of the disease.

The child of Mr. Turtle, in Oxford Street, near Argyle Street, is said by Dr. Rowley to have had the cow-pox mange. He says, the case was treated unsuccessfully as the itch. Cases of the itch, it is well known, are unsuccessfully treated, from various causes. In the present, the child was under the care of Dr. Merriman; who declares, that if he ever saw the itch in his life, this was the itch. No one will suppose it was *unskilfully* treated by him.

That the disorder was not occasioned by the cow-pox is evident to every candid inquirer; for it appears from the mother's

mother's account, that it did not commence till seven months after vaccination; when the child was put out to be weaned, and slept with a servant out of place, whose subsequent conduct is sufficient to warrant an opinion, that she might have had the itch.

The child of Mr. Mazoyer, of Grafton Street, is said by Dr. Rowley to have had the small-pox, of which he died, after vaccination. To give this case the greater authenticity, he says, "sent by Dr. Coombe's, Bloomsbury, to see the case, in company with Dr. Kennedy. Seen by many of the faculty." This instance furnishes a specimen of the manner in which many of the faculty inquired into such cases; for when I asked Mrs. Mazoyer, whether any mark remained after vaccination, she replied, "there was a mark at first; but it has not been visible for the last six months."—This is a sufficient proof, that the child was not properly vaccinated.

Dr. Rowley says, "the tragic scene would have melted a soul of adamant; though a cruel vaccinator abused the parents in their deep affliction."—This is one of the foulest calumnies on record; and no friend of vaccination, or of justice and truth, can wish it to remain unrefuted. Mrs. Mazoyer assures me, that every person who came to her house on this occasion, behaved with the utmost humanity and politeness; except one, who is a quack, and of course an anti-vaccinist. This man spoke in a very rude manner to one of the friends of vaccination; who, as Mrs. Mazoyer observes, excused it on account of the quarter whence it came."

In one respect, Dr. Rowley is perfectly right in his assertion. He says, "the indefatigable Dr. Moseley pursues the subject, and has favoured the author with a succession of disastrous events from vaccination, enough to fill the soul with horror; and all *credulous* parents with the most pungent grief."

It would be an endless task to point out all the misrepresentations in this work; but it is proper to observe, that every kind of exaggeration occurs in almost every page. One child is said to have been in danger of losing its arm, who had only a common abscess; and others, from whom drawings were made, are said to have fallen victims to the small-pox, although they have never had that disorder; and I have reason to believe, that they are at this moment in perfect health.

Such are the cases, for the truth of which, or at least of a considerable proportion of them, Mr. Birch contends, in

in his "Serious Reasons."—This is a serious reason, in addition to others, why the fallacy of those cases should be pointed out.

There is another fallacy, which ought also to be pointed out, namely, the mean artifice of republishing old works under a new title, which has several times been practised by the anti-vaccinists; and which, as is observed by certain reviewers, in their remarks on Mr. Birch's pamphlet, may be considered as *a take-in.* On that pamphlet, as well as Dr. Moseley's "Oliver for a Rowland," I intend shortly to publish some remarks in another form.

Before I conclude this letter, it may be proper to make some remarks on one or two other passages of Mr. Davies's communication. He says, when new theories in medicine are discovered, they will be received by experienced practitioners with caution, and examined with candor. Here he probably alludes to the candour of his neighbour, the experienced practitioner at the Albany; who condemned vaccination before he saw it, or knew what it was.

Mr. Davies insinuates, that a subject of *controversy* cannot be of a *practical* nature. This is no wonder, when he considers the discovery of vaccination only as the discovery of a new theory in medicine. But perhaps he may say, and say without any great violation of truth, *Davus sum, non Œdipus.*

He says the practice is sanctioned by general approbation, throughout the greatest part of the habitable globe; and therefore thinks it unnecessary to "*Ring*" another peal in the ears of the medical world on that long debated point. But I beg leave to observe, that it is not at present sanctioned with general approbation in this country, owing to the obstacles thrown in its way by certain obscure practitioners; some of whom are its *pretended* friends.

Mr. Davies justly remarks, that there is still room for improvement in the healing art. I cannot, however, consider that man a friend to improvement, who wishes to prevent a full investigation of what comes from the press.—Vaccination is undoubtedly a *practical* art; and were it a *profitable* one also, it would have met with less opposition.

I am, &c.

JOHN RING.

New-Street, Hanover-Square.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

WILL you do me the favour of inserting the following Case of Calculus in the Urethra, and that of a Lusus Naturæ; an instance of the kind, to the best of my knowledge, is not recorded; and it is allowed to be essential in all the studies of Nature to be aware of her aberrations.

I am, &c.

G. BELLAMY, M.D.

His Majesty's Ship Hector, Plymouth, August 24th, 1807.

Henri Lotier, a French prisoner of war, came under my care, October 16, 1806, for a calculus in the urethra; very large, lodged about half an inch from the orifice of the glans penis. I tried in vain with various instruments to extract it; then divided the urethra in a line with the orifice, in preference to the part immediately over the stone, being less liable to become fistulous or callous, and more easily brought in contact, and only one passage for the urine. The stone weighed 9 grs.; I succeeded in healing the wound more readily than I expected, and with less inflammation; by the help of the bougie, adhesive straps, saturne lotions, occasional cathartics, and opiates; but the orifice remained about half more than its natural size, and fortunately that it was so, and that I preferred that part to make it; for about six months after, he evacuated, after a little suffering, one much larger, weighing gr. xiii $\frac{1}{4}$. Now, as there is a predisposition to calculi in such patients, I should in future cases divide at the same spot, provided the calculus could be brought forward, even within an inch of the orifice, and I would intentionally leave it rather larger than natural. The advantages of which plan are too plain to be enumerated, as are also incoveniences attendant on repeated incision of the urethra, for each stone which might be presented.

Jean Baptiste Fournier, aged about 50 years, has been from his birth in a state of entire emasculation; he first presented himself to me an invalid, with a whisper, "Monsieur je ne suis pas homme." I observed a degree of effeminacy in his manner, figure, and complexion; but his voice less so than the other marks. Skin fair, thin, and soft; muscles of a lax fibre, and the chin beardless. He

He was embarked as a sailor, but had little nerve or masculine vigour of mind or body. On exhibiting the pubes the appearances were perfectly infantile, of the male kind; penis exceedingly small, with a long prepuce, in all about an inch and a half, but perfect in figure and parts, if an infant; with some difficulty, a part of the glans may be exposed, and the orifice of the urethra is natural. The scrotum is very small, even less than that of a fœtus, and is flattened on the pubes, and appears with the penis, to be situated much higher on the pubes than usual. There is not one hair, nor, by the most minute examination, the least trace of testes, or spermatic vessels; he has occasionally slight erections, but never any seminal evacuation, or uneasiness for want of venereal enjoyment, the desire for which he never felt; in short, his own expression, " Jai passé une triste jeunesse" is the best comment on his degree of manhood.

An Account of the good Effects of copious Blood-letting in the Cure of an Hemorrhage from the Lungs; in a Letter from the Rev. Dr. Samuel Smith, *President of the College of New Jersey, to* Dr. Benjamin Rush.

Dear Sir,

As the science of medicine is established on an induction of facts, well attested histories of the successful treatment of diseases must be singularly useful. It is with a view to add one case more to your useful collection, that I have been induced to give you an account of an uncommon hemorrhage with which I have been affected myself, and of my perfect recovery from it.

A certain weakness of breast, and tendency to hemorrhage, was hereditary on my mother's side of the family, whom I was supposed to resemble in constitution and countenance. Shortly after I was licensed to preach I was thrown into a situation which required unusual exertions. I had often to address very large assemblies, at least three times in the week, and frequently every day. In consequence of these efforts, at the end of about three years I began to raise small quantities of blood at the close of each discourse. This symptom continued to increase; and during nearly four years more, though I moderated my exertions, and made them much less frequent,

I raised

I raised some blood at the end of almost every sermon that I delivered, and sometimes in considerable quantities. The spitting often continued, in a less or greater degree, for several days afterwards. I was at length obliged to intermit preaching entirely for the space of eight months, during which time I spent part of a season at the Sweet Springs in Virginia. I recovered a tolerable, though a delicate state of health. At this period I was removed to Princeton, where speaking to small assemblies, and in a chapel happily accommodated to favour the voice, I continued to preach, and to attend my other duties in the College, during two years, with increasing health and vigour. In the autumn of the year 1782, I suddenly broke a blood-vessel in my breast, as I was walking. A considerable quantity of blood issued from the wound; but by bleeding copiously at my arm, the flux from my breast at that time was stopped. Nearly about the same time in the next evening I felt my pulse quicken, and an unusual tension growing on all my nerves, and, in a few seconds, the blood began to spout with great velocity thro' my mouth and nose; I was again bled largely twice in the course of the evening, from my arm and foot. The following evening a similar paroxysm returned, and the blood again spouted with great force from my mouth. The physician was sitting on my bed-side at the time; and when I perceived the quickening of my pulse, and that strange stricture coming, as it seemed to my feeling, on the whole system of the nerves, I gave him notice of it, and requested him to bleed me. He refused, and said, so much bleeding would only tend to bring on an habitual hemorrhage by debility. I told him, I would rather die bleeding from the arm than the mouth. At last, when he saw the force with which the blood issued, and, in consequence of my earnest solicitations, he bled me again. I requested him to leave me his lancet, and I would be answerable for my own life. This he reluctantly consented to do. At this time two other physicians were called in, who bled me twice more the same evening, before they could effectually stop the flux from my mouth. Next day I expectorated nearly a pint of clotted blood, that had been lodged somewhere in the cavities of the lungs. Being now in possession of a lancet, and apprised by experience of the symptoms that preceded the return of my disorder, I determined to anticipate it, and when the physicians were not present, to open my own veins. This I did accordingly, whenever I perceived the symptoms I have already mentioned,

mentioned, which now recurred more frequently for four or five days. After that period they subsided. But I continued bleeding at the arm two, three, and four times in a day, until the tenth day. My intention was to take off the impulse of the blood from the wounded part, to prevent an inflammation, and to give it time to heal. I may, perhaps, have bled myself oftener than was necessary.—After pursuing this course, however, the flux of blood no more discovered itself from my breast. Two-and-thirty times I was bled in the space of ten days, in my arms and feet, besides what flowed from my mouth. And it was computed, from the dimensions of the vessels in which it was received, and other circumstances, that I lost, in that time, at least two gallons of blood. Even in this reduced state, so great was my apprehension of the hemorrhage in my breast returning, I continued to bleed at the arm twice in the week for some time, afterwards once in the week, and finally, once in a month during several months; tho' not in large quantities at each time. After the hemorrhage was entirely stopped my flesh wasted away for want of its proper nourishment in the blood, till not a muscle could be perceived on any of my limbs; the skin appeared to be drawn almost close to the skeleton; I spoke only in a whisper; and I was not sensible of having forgotten myself for a moment in sleep during six weeks. My complexion was tinged with a yellowish hue, and an acid so prevailed in my constitution, that with my tongue I have frequently curdled a small bowl of milk. For more than three months I could not use bread, or any vegetable substance in my diet. I lived chiefly on beef liquor, soups, and white meats. I drank a little weak wine and water frequently; but after many trials, I found porter as a drink agree best with my stomach, and at the end of some months I used it freely and constantly. As soon as I could bear the motion of a carriage, I took gentle exercise in that way. Afterwards, when I could sit a horse alone, I was helped into the saddle, and every day rode a small distance, increasing it gradually till I rode from twelve to fifteen miles in a day. Here my recovery was at a stand for some months, when I resolved to try the effect of a long journey on horseback. I rode first into Connecticut, and afterwards to Boston, in which journeys I laid the foundation of that good health which I have now continued to enjoy for more than ten years; and my voice, particularly, is clearer and stronger than it ever was. A habit that frequently required aperient medicines, was greatly increased by

by loss of blood, and for more than seven years I was obliged to have daily recourse to them. It is now upwards of three years since I have used them at all. A pint of beer or of cyder at any time sufficiently answers the purpose. This fact is contrary to another principle of many physicians, and contrary to the pressing advice of several of my medical friends, rather to struggle with the disease than to use so constantly the medicines necessary to overcome it. They assured me that I would totally destroy the tone of my bowels, and perhaps fall an early victim to my remedies. However, resolved to live as comfortably as possible while I should live, and not solicitous for a prolonged existence of sickness and pain, I persisted in my own course; and I now find that the medicine was infinitely less pernicious than the habit, and that, contrary to prediction, it has relaxed the tone of my bowels just to that state in which it ought to be. I have found, however, many years ago, that a small pressure upon them, impeded their regular action, and produced sickness at stomach, and pain in the head. This induced me to invent a kind of suspenders to relieve my stomach, long before I knew that fashion would employ them to shew the shape to more advantage. My own experience has convinced me, that persons of delicate habits often suffer greatly from tight waist-bands, when they are not able to assign the cause, and especially women, from the manner in which many of them tie their clothes, and the weights they suspend in their pockets.

Thus, Sir, I have given you the history of my disease, and the treatment of it, which, I doubt not, you will pronounce uncommon. I have gone back to an early period of it, that, having all the facts before you, you might form a more accurate judgment of the whole. I have, perhaps, carried my bleedings somewhat farther than was absolutely necessary; but, in such cases, it is difficult to fix the point of strict necessity, and success has justified my rashness. And I am persuaded that, to great bleeding, and the thick flannels in which I immediately wrapped myself, all with a view of taking off the impulse of the blood from the wound in my breast, I owe my freedom almost wholly from inflammation and cough. I judge thus, because in many instances since that time, when I have imprudently taken cold, and feared the effect of the cough on my breast, I have had immediate recourse to increase of flannel and to bleeding, which have relieved me in a very short time.

I have

I have had no medical education, and have had no theory to bias my mind. What I have done at any time contrary to advice, I have done, impelled by the urgency of symptoms, or led by probable conjectures concerning the effect of the means I used, without being restrained by Principles which might, perhaps, have intimidated me. I draw no general conclusions from my particular case. This you will be better able to do when you have compared it with so many others which must have come under your observation. I believe it would be dangerous for an indolent and inactive person to be reduced so low by bleeding as I have been, or one who had not equal resolution to make the exertions necessary to recover himself from that state. Activity in duty and firmness of mind, are often among the best medicines.

History of several Cases of Phthisis Pulmonalis treated with Mercury, by Mr. W. Watson; *in a Letter to* Dr. Coxe, *of Philadelphia.*

THE three following cases of phthisis pulmonalis were treated with mercury. In one case the mercury was ineffectual; but this case can furnish no objection to its use; on the contrary, it irresistibly enforces more seasonable application. Although the treatment of pulmonary consumption by mercury is pretty generally known, yet there still prevails such a degree of scepticism of its efficacy, amongst many of the physicians distant from the city, as to render the publication of cases, as they occur, highly necessary. Some have used it without success, which has deterred them from a second attempt. But it is not to be supposed that it can effect a cure in every instance. Other diseases, of much less force, have destroyed life, notwithstanding they have had their appropriate remedies. It is to be hoped that the doubts of medical men on this subject will shortly be dissipated; and to furnish my mite, the subsequent cases are submitted.

I was called, on the 8th of February, 1804, to visit E. W. Hale, Esq. counsellor at law, a young gentleman about twenty-seven years of age, who, a few days before, had been attacked with pneumonia from great exposure to cold. He was able to walk about, but, contrary to his usual appearance, was very much dejected; complained of lassitude, fever, and hard and dry cough, but unaccompanied

panied with pain in any part of the thorax; the pulse small but tense. I conceived his disease to be a bad catarrh, but having suspected for some months previous that his lungs were in a very weak state, I felt a good deal apprehensive of the event.

He was blooded, and took an emetic of ipecacuanha. His blood exhibited very evident marks of inflammation, and his pulse rose after the operation. I left him a few pills, composed of digitalis and opium, from which, in former cases of this disease, I had experienced very happy effects; and as I lived twelve miles distant, I directed him to be blooded next morning, if the cough and stricture were not relieved. He was blooded the next morning, and I visited him on the 10th. He had found no relief from the remedies mentioned, and the indication for blood-letting was greater than at any time before. I bled him; the blood was sizy and coated, as in pleurisy. I left him some antimonial powders, compounded of nitre, tartarized antimony, and calomel, in the proportion directed by Dr. Rush. He was to take one every second hour till my return, and also to be blooded every day, if fever and stricture were not abated. On the 12th I visited him; he seemed much better; was able to walk about; but as the cough was still hard and dry, with stricture, he was again blooded, and directed to have the operation performed daily, till he could expectorate with freedom. The powders were repeated, so as to purge and sweat him. On the 17th he sent for me. I found him much worse; he was unable to leave his bed, fever very high, his cheeks efflorescent, and his pulse frequent and tense. I bled him, and remained the night with him, and the next morning bled him again. The blood was very inflammatory, but there was still no pain of the chest. The antimonial powders were continued; they sweated and purged him, but neither the cough, fever, nor stricture, were relieved. The 20th I saw him; he complained much of weakness and a distressing tickling cough. His pulse still indicated blood letting; the blood very inflammatory. I gave him a mixture of nitre and spermaceti in the yolk of an egg, which appeased the tickling. The arterial action was now less convulsive, fever much moderated; but the cough and oppression of the præcordia continued, with much distress. From the commencement of the disease, he had expectorated after coughing, a little thin acrid matter mixed with striæ of florid blood. I now applied a blistering plaster over each lobe of the lungs, so large as to cover all the

anterior portion of the thorax. While the blisters were rising, he sweated most profusely. The blisters rose well, and excited severe strangury, which I did not attempt to relieve as long as it could be borne, having observed, in fevers, the happiest effects from this symptom, in determining excitement from parts more essential to life. The strangury was removed by the spiritus nitri dulcis. The cough was now very distressing, and expectoration by no means free; but there was a total change in the action of the pulse. It was faltering and thread-like, and the coughing harassed him so much, that I was apprehensive he could not survive many hours. Profuse sweating and frequent deliquia animi: laudanum was prescribed, and to be repeated after short intervals, to prevent the torpor of indirect debility. He took a little Madeira wine frequently, and sago gruel for food; with these he was supported for several days. From his cough, hoarseness, stricture, and the matter expectorated being streaked with blood, I was satisfied the disease had degenerated into phthisis pulmonalis. At this time he was as much emaciated as I had ever known a patient to be in the typhus state of the same disease.

It was then twenty-two days from the period of attack; I had no hopes of a recovery. He was unable to change his position in bed. A severe hectic visited him every afternoon, and he could not speak to be understood. He took wine, laudanum, opium, and sometimes bark; but they afforded a very temporary relief.

I had seen, some time ago, in the Medical Repository, three letters from Dr. Rush to Dr. Miller, on the efficacy of mercury and tonic remedies in pulmonary consumption. I had attempted this medicine with others, but they were too much exhausted before they would submit to its administration. I now began it with Mr. Hale, but doubted much whether ptyalism could be excited. I dreaded that the excitability was too far exhausted to favour the operation of any remedy.

Half an ounce of strong mercurial ointment was directed to be rubbed into his sides and breast every night, and two grains of calomel, with half a grain of opium to be taken every fourth hour. This prescription was attended to till the 26th, when I saw him: the mercury had produced no affection of the stomach or intestines. He had become costive. In addition to former directions, another half ounce of the ointment was to be rubbed into the same parts every morning. The 28th, he had still no dejection

jection from the bowels; two laxative enemata were administered in the course of the evening, which removed the constipation. The mercury was continued without any evident effect, either upon his mouth or upon his breath. In addition to the mercury already prescribed, four grains of calomel were directed to be taken morning and evening, mixed with a little honey, which was to be dissolved in the mouth, with the intention of exciting action in the gums and salivary glands. On the 4th, there were no symptoms of mercurial disease; the medicine did not even purge him.

The mercury had now been taken for eleven days, in the quantities mentioned. He ceased to take it internally, but two ounces of mercurial ointment were directed to be rubbed into his sides, breast, and thighs, every twenty-four hours, and Madeira wine and laudanum to be given in such quantities, and repeated after such intervals, as might support the continued excitement of the medicine. They were prescribed with the intention of raising the system to that point, which would favour the salutary operation of mercury. 6th, No symptoms of ptyalism. 9th, The same; cough distressing, copious expectoration of pus and florid blood, excited with deep, sonorous, and difficult coughing. Hectic fever very high every afternoon.

The vascular system, as well as the muscles, were in the most extreme state of debility. The mercury was still continued externally, and bark given to support a more durable excitement, and laudanum to appease the distress of coughing. His common drink, during the whole course of this treatment, was malt beer, in the usual strength. 11th, No change of situation. Bark did not agree well with his stomach, and wine, soups, and opium, were administered as a substitute. 14th, I visited him,—the mercury had not acted.

I then consulted, by letter, my ingenious friend Dr. Harris, of Bellefont, who, I had heard, had been successful in the cure of Phthisis Pulmonalis, with the mercurial treatment. He advised the use of more durable stimulants, as columbo, gentian, &c. and the application of flannel bandages saturated with mercurial ointment, to the breast and sides, after removing the skin by blisters; but to precede the tonics with a nauseating dose of tartarized antimony, to excite new action of the stomach. A trial of the carbonic acid gas, as directed by Dr. Beddoes, was also recommended, either as a means of depriving the

 lungs

lungs of the usual quantity of oxygen, the principle of inflammation and ulceration, or as a vulnerary. The nauseating dose was immediately prescribed, the blister applied to the breast and ribs, and columbo given in substance, mixed with beer. This was done on the 17th. 19th, His condition as usual. The saturated bandages were now applied. Calomel was rubbed into the mouth and gums, and mercurial ointment was rubbed into his throat. He inhaled, during several days, the carbonic acid gas from a tube placed in his mouth, when it was discontinued, as well from its apparent inutility, as from a supposition that it might impede the ptyalitic excitement of mercury by disoxygenating the system. He alternated the durable stimulants, columbo, gentian, orange peel and bark, with one another, till the 26th, when calomel and opium were given in doses of a grain each, every fourth hour. The stimulants were continued, the calomel rubbed into his cheeks and gums twice a day, and the ointment into the throat as often. The bandages were renewed after being saturated, every twenty-four hours.

His mouth had been sore from the commencement of the disease; but it now exhibited evident symptoms of the operation of mercury; his breath also indicated the action of the medicine; but all the symptoms of pulmonic disease continued with unabated violence. 29th, His mouth ulcerated, but no appearance of ptyalism. April 2nd, The salivation had not begun, nor did his mouth appear more affected. From the 21st ultimo I had discovered soreness of the gums from the mercury. At this time, I had it in view to try the nitric acid, to hasten the ptyalitic action, but when I returned on the 4th, the salivation had begun.

Thus, after having spent *forty-two* days in the most assiduous attempts to salivate him, with unspeakable joy I succeeded, after having prescribed two hundred and twenty-two grains of calomel, and thirty ounces of mercurial ointment, composed of two parts axunge, and one part hydrargyrus. The stimulants mentioned were continued, and the mercury as before, and he had used a cordial and stimulating diet, from the transition of excessive to deficient excitement of the muscular and vascular systems.

8th, He salivated about two pints in the twenty-four hours. The cough had abated in frequency and violence. The saturated bandages were suffered to remain, but the calomel and opium were withheld. 12th, The salivation had increased to three pints, the cough perfectly easy, and the

the quantity of pus expectorated, much diminished. 16th, The mouth and fauces very much swelled, salivation very profuse. The columbo, &c. were withheld, and laudanum directed to be frequently taken, and a gargle of borax and honey dissolved in tepid water, diligently used. 19th, The discharge of purulent matter had disappeared, and the cough had entirely left him. At this time, from two to three quarts of saliva daily flowed from his mouth. The emaciation was extreme, and he had not as yet been able to raise himself from his bed. His appetite good.—He now took columbo in infusion, cordial diet, and laudanum. The saturated bandages were directed to be removed; but owing to a mistake in the attendants, they were suffered to remain on till the 1st of May. At this time he could walk through the room, although the salivation had not abated in the least, and the emaciation was, if possible, greater. The bandages were now removed. He continued the columbo, gentian, &c. and on the 11th, the ptyalism began to abate, but did not altogether leave him till the 15th of June—all which time he took the durable stimulants in diminished quantities, cordial diet, wine, beer, and London porter.

The recovery of health was rapid; but hoarseness and weakness of the voice remained. He was directed to take garlic daily, which removed these symptoms about two months after. He is now more lusty than he had ever been before; but occasionally feels a pain in his breast from close reading or writing, which leaves him when he rides or exercises. From the 22nd of February he drank half a gallon of beer daily. Five weeks of the time he was under the operation of mercury, he never spoke, on account of the tumefaction and soreness of his mouth, tongue, and fauces.

He had the remittent fever slightly, the autumn before he was attacked with pneumonia; till that time he had been very healthy, and somewhat corpulent. The disease was not hereditary, nor had he any appearance of mal-formation of the thorax. Since his recovery, he has been perfectly healthy, except that he had a few fits of vernal intermittent, in the last month.

I was called on the 10th of April, 1804, to visit Mrs. Irvine, a married lady of delicate habit, about thirty years of age, who had been afflicted with cough and pain of the chest for eighteen months before. She was confined to bed, much emaciated, with incessant cough, and purulent expectoration; no appetite, hectic fever in the

 afternoon,

afternoon, pulse quick, frequent and irregular, oppression and dyspnœa, especially on the slightest motion. She had borne three children, and from the birth of the last, she had dated her disease.

I took away a few ounces of blood, gave her the antimonial powders, and directed two drachms of mercurial ointment to be rubbed into her sides and breast every night. 13th, Her mouth sore, gums swelled, and ptyalism begun. I was suddenly called to her to-day, when I found her in an hysteric paroxysm. I gave her a few drops of vitriolic æther, which, after two or three repetitions, relieved the paroxysm.

About two o'clock the next morning, I was sent for, in the utmost haste, to visit her. When I arrived, I found the attendants supporting her in the bed, in a fainting fit. In her sleep she had been attacked with menorrhagia, and the discharge was so profuse as to induce deliquium, before it was discovered. No pulse could be distinguished, and the discharge continued without abatement. I gave her a little laudanum, and directed one of the attendants to introduce flour into the vagina, and press upon it with the hand; and as soon as she could swallow with freedom, I gave her kino and alum rup. She took them in such quantities, and repeated with as much frequency as her stomach would bear. The discharge, however; did not abate. I was afraid to apply cold water, by reason of the mercury; but I soon saw it must be used or my patient must sink. Cold water was then applied to the abdomen, perinæum, &c. the windows were opened, and she was directed to drink cold water. The disease abated soon after, and ceased in two or three days. I looked forward with much anxiety for the consequence; but on the 15th her throat, fauces, tongue, &c. swelled astonishingly, but her breathing was not much impeded, and I was now relieved from my apprehensions. The tumefaction of the throat was so great as to prevent swallowing. For ten days she was supported by injections of broth; but the swelling then gave way to blistering on the back of the neck and around the throat, and borax as a gargle. 22nd, Salivated about a pint daily: the mercurial frictions were continued. May 1st, Salivation profuse, cough and purulent expectoration much abated. 9th, Cough and expectoration ceased. 14th, Mercurial frictions were discontinued, and an infusion of columbo with wine and a cordial diet, were recommended to be taken. She was excessively weak, but after this time recovered strength daily. 26th, Salivation

Salivation abated, which left her the 7th of June. She continued to take columbo, gentian, bark, and orange peel, in succession, till the 1st of August, when her strength was quite restored. She is now much more healthy and strong than she has been for several years.

Miss Lyon, a young lady of twenty three years of age, put herself under my care in May, 1804. She laboured under phthisis pulmonalis for eighteen months or two years. She was much emaciated, had hectic fever, night sweats, did not cough much, nor did her cough agitate her; but she expectorated very freely, had great weakness, and was very averse from motion or exercise. I gave her calomel and opium, and directed mercurial ointment to be rubbed into her sides and breast. The mercury produced no effect. A large blister was applied to her breast and ribs, and saturated bandages applied as in the case of Mr. Hale, but still without effect. Blisters were then applied to the inner sides of her thighs and under her arms, and dressed with mercurial ointment and calomel united. She took infusion of columbo through the day, in such quantities as her stomach would bear, and opium at night. These remedies were continued for six weeks without any abatement of pulmonary disease, and without exciting the least action in the gums, fauces, throat, or salivary glands, when she died a lamentable instance of too late application;—the excitability being exhausted below that point, in which mercury will excite disease.

On the diuretic Effects of Mercury in a Case of Syphilis. By James S. Stringham, M. D. Professor of Chemistry in Columbia College, *N. America.*

The subject of the following case, Mr. A—— B——, applied to me early in the month of October last, in consequence of a small ulcer in the throat, which he suspected to be the effect of a syphilitic taint, as he had had chancres during the summer before. It appeared that for the cure of these he had taken a very considerable quantity of mercury, though his mouth had been but slightly affected by it. I advised him again to adopt a mercurial course; and for this purpose furnished him with the pilulæ hydrargyri of the Ed. Pharm. Of these he began with one, morning and evening, but finding no inconvenience of the stomach

stomach or bowels from them, he gradually increased the quantity to eight each day. These, together with the decoct. lignor. were continued from the 30th of October to the 19th of December, when by my particular request he desisted from any further use of the remedy. I was much surprised to find that, notwithstanding the great number of pills which he had taken, and the great quantity of mercury which must necessarily have been introduced into his system, no perceptible effects had been produced either upon the salivary glands, the gums, or the breath. On inquiry, he informed me that he had sometimes experienced a slight soreness of the mouth while taking the pills, that this was soon succeeded by an unusual flow of urine, after which every trace of the mercury entirely disappeared. This presented to me a case of a complexion entirely novel, and I determined to make another effort to produce an effect which I considered as essential to his safety. Accordingly, he again commenced taking mercury combined with opium, and every precaution was taken to guard against its action as a diuretic—but in vain; no sooner was any part of the fauces affected by the medicine, than a præternatural secretion took place in the kidneys; and although he continued to take his pills regularly, his mouth became sound as though they had never been exhibited. With respect to his throat, the ulcer began to mend shortly after he commenced the mercurial course, and in about three weeks entirely disappeared; but it has since occasionally returned, though by the application of caustic it was removed in two or three days. I may remark, that during the exhibition of the mercury, neither the stomach nor bowels of my patient were in any way affected by it.

It is very possible that cases of a similar kind may have occurred in the private practice of other physicians, but I do not recollect that any instance has been recorded, where such a regular determination to the kidneys took place from the action of mercury, so effectually counteracting the objects for which it was intended. I confess that I feel no small degree of embarrassment with respect to that plan of treatment which will most effectually guard against the recurrence of syphilitic symptoms in this case, and more particularly as to what are the data, on which I may venture to pronounce my patient secured against any future inconvenience from his present infection.

I have heard physicians complain of the great difficulty they sometimes found in producing salivation. May not the same obstacle have existed in such instances as in the case

case just related? And where too profuse a salivation supervenes, may we not infer from this case, that diuretics are the most effectual means by which to procure an alleviation of symptoms?

Account of the Efficacy of copious Blood-letting in a Wound of the Lungs, &c. By Dr. Hugh G. Shaw; *in a Letter to* Dr. Rush.

Dear Sir,

I EARLY had it in contemplation to communicate to you the following remarkable case of a wound in the lungs, which came under Dr. Martin's and my observation, the last summer. Your late request to the Doctor, has confirmed me in my intention; I therefore proceed to lay it before you, relying on your usual candour to point out its imperfections.

Henry Oelman, an active man, about forty years of age, a native of Germany, on the evening of the 18th of June last, in attempting to jump from a hay-loft window into a waggon, fell upon one of the ledge-pins, which penetrated between the second and third false ribs of the right side, in an oblique direction upwards. The seat of the accident being at Mr. Abraham Rittenhouse's, two miles from Germantown, an hour had nearly elapsed before we saw him. On inquiring into particulars, his companions of the meadow informed us, "that he had turned half round on the pin, in order to disengage himself, before they could relieve him; and that a stout man, with much difficulty, raised him off, supported in his arms." On examining the wound and the instrument, we found it had passed eight-and-a-half inches, (that extremity being three and one-eighth inches in circumference) and, in its progress, wounded the anterior portion of the right lobe of the lungs.

This we were satisfied in, from plainly distinguishing with the finger, the lacerated parts, when we placed him in different positions.

The intercostal artery, although doubtless abraded, was not ruptured; the hemorrhage, however, was considerable. On withdrawing the finger, a great quantity of air rushed from the wound. Having made use of the common method

thod of expelling the remainder of what entered there, we dressed it with a pledget of simple ointment. At this time, the hemorrhage externally, had stopped. He complained of violent oppression; his pulse tense and depressed, his breathing very difficult, though he spoke pretty distinctly. As quickly as circumstances would admit, we took thirty-two ounces of blood from him, after which he said he felt greatly relieved. In order to empty the intestines, he was afterwards ordered a smart purge. The next morning at five o'clock we saw him. His purge had operated, and he slept tolerably well the remainder of the night; but then complained of a severe pain and oppression across the inferior part of the thorax, as far as the scrobiculus cordis. The blood drawn the evening before was not remarkably sizy. I immediately took away eighteen ounces more; his pulse, which before was uncommonly tense, now became softer and fuller, and he said he was much easier. I discovered that one of the family, in order to gratify his accustomed fondness for strong liquors, and willing, as he said, to comfort him in his last moments, had given him a glass or two of spirits. We took the alarm, and determining to adhere closely to the antiphlogistic plan, strictly enjoined the necessity of avoiding any thing the least spirituous, and ordered him to live on weak gruel, chicken water, &c. which I believe, except in one instance, was punctually complied with. I confess I was remiss in not enforcing this earlier. We immediately put him on the use of nitre and the vegetable acids. We were fearful of joining tart. emet. to the nitre; lest the quantity necessary to support a gentle diaphoresis might excite vomiting. We ordered, as a laxative, occasional doses of the ol. ricini, which he said he could take better than any other medicine. At twelve o'clock, I found his pulse hard, accompanied with no small degree of dyspnœa. The seat of the most considerable pain was posteriorly along the lower false ribs. This I attributed to an accumulation of extravasated blood. I took away ten ounces, dressed the wound and found its appearance favourable. In the evening, I observed that the blood taken at noon was much more sizy than either of the preceding. From this circumstance, and the still existing painful and oppressive symptoms, I was readily induced to repeat the bleeding to the amount of ten ounces. This bleeding, he said, sensibly relieved him, more particularly his breathing. Saturday morning, 20th, I found him much better; the wound discharging a laudable pus; his pulse pretty regular, breathing tolerable

able easy; almost clear of pain; his bowels quite free. I therefore did not bleed him, but I had afterwards reason to repent that I had not; for at twelve o'clock, a messenger came up and told me "he was dying!" I went down immediately, and found him in violent pain, delirious, with a quick tense pulse, and great difficulty of breathing. On applying the ligature with a view to take more blood, I was surprised to find that it would not flow as usual, from the first orifice; I immediately enlarged the orifice, to twice the size, when to my astonishment, the blood passed off in a thick and grumous state, with considerable large clots. I was convinced from this appearance, that a re-absorption had taken place. After losing twelve ounces he declared himself "another man." Dr. Martin in the evening found his pulse at 85, and full; his appetite remarkably good, as from the beginning. He took away eight ounces of blood, still dark and grumous; and ordered him some fruit jellies. Sunday, 21st, his pulse unusually full and quick. On inquiry, I found that he had eaten meat, contrary to our strictest orders. I took away ten ounces of blood, which ran freely from the first orifice, and appeared much thinner than any of the preceding. He continued pretty easy all that day and the next, requiring only two small bleedings (sixteen ounces). Tuesday, 23d, rested very well the night before; his pulse soft and regular; appetite good; so well as to sit in a chair and have the wound dressed, which was now nearly closed. Wednesday, Continues free from pain, except a little in the right shoulder. Thursday, 25th, One of his friends came to me in a great hurry, and told me he was dangerously ill. On my arrival, I found his situation truly alarming: a strong hard pulse, skin and tongue dry, violent pain in the head and breast, dyspnœa, delirium. On inquiring into the cause of this dreadful change, the family informed me, "that he had imprudently dressed himself, the day before, and sat by an open window, while it rained; that he frequently put his head out and got wet." I once more had recourse to the lancet, and took away twenty-eight ounces of the purple fluid; on which he exclaimed, "that he felt himself in a new world." In the evening he told me the mercurial pills I ordered had operated very well, but that he still felt a good deal of pain and oppression; his pulse full, and veins turgid. I bled him twenty-four ounces, which instantly relieved his pain and oppressed respiration.

The

The two succeeding days passed without any symptom of danger or alarm. Sunday, 27th, Dr. Martin visited him; found his pulse full, and about 80; had slept tolerably; the wound almost healed; took away ten ounces. At half past three I found him cheerful; his pulse 75; had two evacuations from having taken some castor oil in the morning. He said the only pain was two inches transversely from the wound. The blood taken in the morning contained a considerable proportion of crassamentum, with but little serum. Half past nine, continues better, though there is a considerable degree of action in his pulse. He sat in a chair and was bled (ad deliquium) eight ounces; appearance black and grumous. His pulse rose considerably after the bleeding. Some pain still continued in his right shoulder. Monday, 28th, Complains of great weakness; pulse is quick, but not full. I took six ounces of blood away, after which he assured me he was entirely clear of pain, except, as he expressed it, " a little between the meat and the ribs;" the wound cicatrizing. The next day I found him sitting up, and in high spirits. He said he felt well enough to ride home, which was half a mile, and anxiously wished to obtain permission; this I peremptorily refused. I continued to visit him for three days. On the fourth I was much surprized, in passing his own house, to see him at the window. On my reproving him, he apologized, by answering, that he became impatient to get home to his family, and had rode up that morning without the least inconvenience. In twenty days from the accident, he made a pair of shoes. We have been under the necessity of bleeding him several times since, at seven or eight weeks interval.

Many cases have since offered, which indispensably required venesection; particularly that of Miss Norton, at the Rising Sun, who, in six days, lost one hundred ounces of blood: both tables of the frontal bone having been dreadfully fractured by the oversetting of a chair.

Germantown, 24th February, 1796.

On

On the Efficacy of Blood-letting in Rigidity of the Os Externum. By Dr. Wm. Dewees.

Case I.

On the 12th September, 1798, I was requested to visit the wife of Samuel Griffith, in consultation with Dr. Jones. Mrs. G——, I was informed by the Doctor, had been in labour sixteen hours; the waters were evacuated early in her labour; her pains frequent and brisk; but, there was not the least disposition in the soft parts to dilate.

I sat down to examine our patient, and found the os externum scarcely large enough to admit the finger, and it was mounted up closely against the symphysis pubis, in consequence of the perineum being very much distended by the head of the child. The os uteri was rigid and but little opened—a kind of bridle or small column of flesh ran from the inferior edge of the os pubis, and lost itself in the perineum below; against this, the head was firmly pressed. The head was situated naturally, and so far advanced, that the vertex was about to emerge from under the arch of the pubes, covered with the uterus; it had been thus fixed for nearly six hours previous to my seeing this patient; and all that had been done, was, the occasional exhibition of tinct. opii. with steady pressure against the perineum to prevent the escape of the head through it. In this situation of affairs what was to be done?

My ingenious and much lamented friend, Dr. E. Smith of New York, immediately after the receipt of my former case, suggested the trial of an infusion of tobacco in similar cases, to supersede the use of such extensive bleeding as had been employed in it; affirming its effects were very similar to those produced by copious blood-letting—such as nausea, vomiting, syncope, and consequently relaxation. The idea pleased me, and I was determined to employ it the first opportunity: The case under consideration I believed to be as favourable a one as could occur, and accordingly proposed it to Dr. Jones; he cheerfully acquiesced in its trial; a strong infusion was made of the tobacco, and a quantity of it with some difficulty, after several ineffectual trials, was thrown up the rectum. It produced great sickness, vomiting and fainting; but the desired relaxation did not take place; we waited some time longer, but with no better success. In the course of an hour, or an hour and a half, the more distressing symptoms produced

produced by the infusion wore off; and resolving to give the remedy every chance in our power, we got our patient with some difficulty, to consent to another application of it. Its effects were as before—great distress—without the smallest benefit; the soft parts remaining equally rigid, as before its exhibition.

Supposing the bridle just spoken of might have some influence on the developement of the external parts, I divided it, but without any evident good resulting from it. I now proposed the remedy that had so completely succeeded in a former case,—bleeding nearly to fainting. This was consented to. We had our patient placed on her feet, taking care to have the perinæum well guarded during the operation. Upon taking away about ten ounces of blood she became very faint;* she was immediately laid upon her bed; the most complete relaxation had taken place; the forceps were applied, and our patient was delivered in a very few minutes of a fine healthy girl. The mother was put comfortably to bed, and every thing went on in the ordinary way until the sixth day, when she was seized with a violent cholera morbus and convulsions, (to which complaints she was subject) and died in twelve hours.

This

* The subject of this case was a delicate woman, and wont to become very faint upon the loss of a little blood. The disposition to syncope has frequently aided me in obstetric cases, where this state was an object in practice; it is well to inquire if this peculiarity exists, as, taking advantage of it, by placing our patients in an erect posture, we are enabled to effect by the loss of a few ounces of blood, what could not be obtained in a supine one by the loss of very many. This circumstance may also aid the timid practitioner, who may be afraid to venture on the great depletion that sometimes becomes necessary to produce this effect, when this situation is not attended to. I have therefore always placed my patients on their feet, when practicable, before I opened the vein. We may also spare ourselves a great deal of trouble, and our patients much anxiety, in cases of tedious labour, from the unwillingness of the soft parts to dilate, where this disposition to syncope from the loss of a few ounces of blood when in an erect posture obtains, by taking advantage of this peculiarity. Few women object to being bled during labour, nay, they for the most part think it indispensable when the labour has been protracted. The consent, therefore, of the patient and her friends is easily obtained; all we have to do is, to conceal from them our wish to have her become faint. Should she faint we can readily satisfy them, by calling to their recollection, it is common to her from bleeding, and that it will be useful to her. In this way, we can very often shorten a labour many hours, when we might not be able to obtain the consent of our patient, or we ourselves think it necessary, to bleed her to the extent of forty or fifty ounces.

This Case, notwithstanding its ultimately unfortunate termination, fully establishes the influence of blood-letting in this very distressing kind of rigidity; and proves it to act differently from tobacco, notwithstanding the latter produces nausea, vomiting, and syncope; and also, that the quantity of blood lost, in some instances, may be very small, to induce the desired relaxation.

We conceive that no possible blame can be attached to the bleeding in this case, as the woman was very brave until the sixth day, when a disease, to which she was subject, supervened, and carried her off.

Case II.

On the 26th of September, 1800, I was called to the wife of Mich. Falkrod, at Frankford, in consultation with Dr. Ruan. She had been in labour twelve or fourteen hours, with her second child;* the pains frequent and strong; the waters discharged some time; the head was situated favourably, and completely occupied the vagina, the perineal tumour large; the os externum not larger than a common finger ring; admitting the finger with some difficulty in the absence of pain; during pain thrown up against the inferior edge of the pubes in such a manner, as not to admit the finger, or allow it to be retained if previously introduced. Externally, a strong cicatrix was found running to the very verge of the anus; internally, it could be traced further. This cicatrix prevented the unfolding of the external parts so effectually, that the repeated efforts of the uterus, for several hours, were insufficient to make them yield, though the head had been closely applied to them during that period.

This patient was a strong healthy woman; considerable fever had been excited; the pulse strong, frequent, and hard. I proposed bleeding ad deliquium, to which Dr. Ruan consented. We immediately opened a vein, and took about forty ounces of blood; but as her pains were so rapid, we were obliged to take it from her in a recumbent posture, and no disposition to syncope was manifested. This quantity, however, had some effect, as there was evidently a beginning relaxation, and an abatement of the

* With the first, she had suffered an extensive laceration of the perineum. It is somewhat remarkable, that all the cases I have related, were in the same neighbourhood, and all had been under the care of the same physician.

the violence and frequency of the pains. We now agreed upon a second bleeding, and to have it taken in an erect situation. We with some difficulty effected this, when, upon taking five and twenty or thirty ounces more, she fainted; she was laid upon the bed, and in a few minutes by the forceps, was delivered of a fine healthy boy. Our patient recovered rapidly without accident, or draw-back.

Case III.

February 26, 1803, I was called to the same woman in labour with her third child. The same circumstances attended, and the same remedy was employed, with a similar result. This case was witnessed by Mr. Bond, an ingenious young gentleman of Baltimore.

History of a Case of Tinea Capitis cured by Vaccination; by Dr. Coxe, *of Philadelphia.*

Eliza Moore, a mulatto child of two years of age, was brought to me March 28, 1804, for advice in an obstinate case of tinea capitis, which had succeeded a sudden suppression of a discharge from the ears, and had now continued nearly seven months. Little or nothing had been done for the child, and the disease had extended itself over the whole head, which had acquired an unpleasant appearance and smell, from the matting together of the hair by the discharge, and want of due attention to it in point of cleanliness. As the small-pox existed in the neighbourhood, and in the very house where the child resided, I told the mother it would be proper first to vaccinate her, to secure her from that disease, before we attended to the complaint of the head. I had another object besides this in view, which was, an expectation of the tinea being removed by the operation of the vaccine on her system. I therefore vaccinated her by two punctures, and directed the mother merely to wash the head with soap and water. This attempt failed, and also a second on the 2d of April; a third, on the 5th, proved more successful, and the disease advanced with perfect regularity, though slightly retarded by early rubbing. It soon, however, resumed its genuine appearance, and the areola was perceptible about the tenth, or beginning of the eleventh day,

day, attended by a slight degree of fever. At this period a very evident alteration in the disease of the head took place. It began to dry up, and in a few days the discharge from the ears recurred; by the time the scab was perfectly complete, about the fifteenth or sixteenth day, the disease was nearly gone; the incrustations having come away in large pieces, leaving the head perfectly sound beneath. The running of the ears in a few weeks was suspended, without any recurrence of the tinea; and the child continues perfectly well to the present time. After the ninth or tenth day, I desired the mother to expose her as much as possible to the small-pox. This she did without any effect from it.

To Dr. BATTY.

Sir,

I AM induced to present you for insertion in the next number of your useful Journal the following translation, expressive of the public opinion in France, on the merit due to the benevolent Jenner, for two reasons.

1. The additional grant of parliament to the discoverer, has been thought by some superfluous and profuse.

2. Others more liberal argue, that if vaccination be that blessing its supporters assert, which they are willing to believe, from the clear and concise report the College of Physicians have laid before parliament, the grant cannot be considered in any other light than a mere reimbursement.

I am, Sir,
Yours, respectfully,
JAMES CLARKE, M. D.

Nottingham, Sept. 9, 1807.

A Project of Remunerating Dr. Jenner, *proposed by* Dr. Valentine, *of Marseilles.**

Ten years have elapsed since Dr. Jenner proved the vaccine inoculation a certain preventive against small-pox.

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* See Journal General de Medicine for March 1807.

It is more than thirty years since he made his first experiments on the nature of cow-pox. Nine years since he published this valuable discovery, and nearly seven years that it has been introduced into France. The practice is at present extended nearly over the whole globe. Many millions have experienced its blessings and every day is marked with the multiplied and uniform success.

Two years were scarcely elapsed when the question appeared completely resolved. There cannot now be any doubt of the possibility of annihilating, by vaccination, the most horrible and most fatal of all diseases.

Have we not always considered this discovery inestimable, and above all comparison, the most important which has been made for the happiness of mankind? Are we not ourselves eager to practice it, and to extend its advantages by every means in our power? We instantly abandoned the inoculation of small-pox, as soon as we were assured that the inoculation of the vaccine was a certain preventative of that disease. Devoted from our profession to combat against the maladies of human nature, we have consolation in not having neglected any thing that might tend to the general good. Truth, often slow in her progress, has conquered by our mutual efforts with an astonishing rapidity.

What acknowledgments do we not owe to the author of this new practice! Let all the world bless him. Every country, every city should offer him a civic crown, and each individual express his gratitude. What man ever performed so much for society! none; no recompense, no dignity, can sufficiently repay such unexampled benefit. The noble and generous manner with which Jenner communicated his discovery, the desire he had to make known the result of his experience, are above all eulogy. As he produced an extraordinary revolution in this important part of medicine for the good of his fellow-creatures, by a practice as simple, as singular, and remarkable; so he did not value to perfect his plan, neither the time, trouble, nor the expence which is occasioned by an immense correspondence.

The medical faculty of France have not been backward to acknowledge him the *Benefactor of Mankind;* and he is thus declared by public opinion. The central committee of vaccine established in Paris, under the auspices of government, and to which France is indebted for the first essays on the new inoculation, as well as the greater part of the happy consequences to the zeal of its members, says,

says, in the Report published in 1803, "The committee cannot finish this report of its present progress, without paying, in the name of the subscribers, a just tribute of acknowledgment to Dr. Jenner, the illustrious author of the discovery, who hereafter will be ranked among those who have most honoured science to benefit mankind."

The reward which the English parliament voted to Jenner in 1802, although accompanied with language extremely honourable, is very far below the incalculable advantages resulting from his discovery. The English nation, under Queen Anne, overwhelmed the Duke of Marlborough with honours. That for his feats in war, she should present him with the estate of Woodstock, where she vauntingly built the magnificent Blenheim, and on an elevation in the park, a superb monument, the base of which, covered with inscriptions, attest his warlike exploits; and the summit supports the statue of the general, is not astonishing. But it is very remarkable that this nation, since 1802, has not done any thing more for Jenner. We have seen only in 1805, that the Lord-Mayor and the Corporation of London, have shewn him proof of the public gratitude in presenting him with the freedom of the city in a gold box set with diamonds, and scientific emblems of the salutary discovery of vaccination.*

Many inhabitants of the East Indies, principally in Bengal and Madras, being struck at the small grant of the British parliament, opened a subscription, the produce of which will be presented to Jenner, who has procured to them the means of extirpating from their country the most destructive plague.

Jenner is become a native of all nations. Like Hippocrates, he belongs to all countries. His name will exist to eternity, even in the most changeable times. It is the present generation that owe him a suitable remuneration. May she prove worthy of the most enlightened period of the world! May the French nation, which knows how to appreciate great acts, no longer delay.†

After

* Since Dr. Valentin addressed to the public the above very just reproach, Parliament having received sufficient evidence, drawn up in the most able manner by the College of Physicians of the increasing utility of, and dependance on vaccination, has thought it proper to make a further grant to Dr. Jenner of 20,000l. T.

† Edward Jenner was born at Berkley, in Gloucestershire, the 17th of May 1749.

After these remarks, I would propose to all the Societies formed in the French empire for the advancement and improvement of Medicine:

1st. To open with the consent, and under the protection of government, a subscription in favour of Dr. Jenner.

2d. The committee of the central Society of Vaccine and the Societies of Medicine in the metropolis, should have exclusively the power of determining the nature of the remnueration to be presented to this great man.

3d. These societies should appoint some of their members to present them with a plan to this effect, and to obtain from his excellency the Minister of the interior, the permission to invite the Societies of Medicine of the departments to contribute to the gift by voluntary subscription.

4th. All the Literary Societies, particularly those which profess medicine, all the members of the Committee of Vaccination, should be at liberty to contribute to it.

5th. At a time fixed for the close of the subscriptions, the commission formed by the Societies of Paris should name the deputies to go to England, as soon as circumstances and the government may permit, to express our respect and our gratitude to Dr. Jenner.

6th. The same commission should determine also the time and place where it may be convenient to erect a statue of him.

7th. It is presumed, that the Societies of Medicine will themselves place a bust of Jenner by the side of that of Hippocrates and Napoleon I.

Marseilles, Feb. 6, 1807.

Case of Mortification and Separation of the Body of the Uterus; also an Account of a monstrous Birth. By Dr. J. Elmer.

A MIDDLE aged woman, the mother of several children, of a slender delicate habit of body, having been exposed to many hardships by reason of her indigent circumstances, was, after hard exercise, taken with a partial *procidentia uteri.* For want of proper assistance, an inflammation and sphaceiation of the *fundus uteri* succeeded, and after some days, about the size of a Spanish dollar, of that part of the uterus which was prolapsed without the vagina, separated

parated; upon which the inflammation subsided, and the woman soon became well without any help.

About two years afterwards, being obliged to travel several hundred miles in a horse-cart, the fatigue of so long a journey, with the violent jolting of the cart, brought on a complete *procidentia uteri;* the whole uterus falling without the vagina, which was followed with a violent inflammation and swelling of the same, upon which I was sent for. When I visited the patient I found her labouring under a burning fever, sickness at stomach, weakness and great pain in the small of the back, and the prolapsed uterus swelled to the size of a large child's head, as black as a hat, of a cadaverous smell, and with every other mark of an incipient mortification; the poor woman being extremely dejected and despairing of any relief. As her pulse was very small and feeble, and the sphacelation so far advanced, I judged it not advisable to bleed, but ordered the parts to be continually fomented with a strong decoction of bitter herbs, and gave her frequent large doses of a nitrous julep, with a little lavender comp. in it. As she lived at a great distance from me, nothing more was done for her. About three days after I saw her, a separation of the whole body of the uterus, which was now growing putrid, began to take place, and in two or three days more, entirely sloughed off from the sound vagina; upon which the pain and fever abated; the patient recovered her health and strength; and the last time I heard from her, which was several months after this affair happened, she was in perfect health.

The following account of an imperfect fœtus may perhaps be thought worthy of notice:

A married woman, in the seventh month of pregnancy, was seized with labour pains that brought on an abortion. She was first delivered of a perfect child, which lived several hours. This being come away, the midwife perceived another behind, of which, with much difficulty, she was also delivered; but instead of a perfect well-formed fœtus, it had the following appearance: the body was completely formed, and about the size of the other child's, but it was wholly destitute of a head, and had but one arm. The body appeared as if the head had been cut square off close to the shoulders; and in the place where the neck should be, there was a small spot about the bigness of an English crown, raw and bloody, having a fibrous appearance as though it had adhered to something.

 The

The side on which the arm was wanting was perfectly smooth without any vestige of an arm. The other arm was well-formed as far as the hand, but it had no fingers, only two little fleshy excrescences, about half an inch long, growing in the place of fingers. Its legs were well shaped, but its heels grew where the instep ought to be, and it was destitute of toes, having only two fleshy excrescences on each foot, (similar to those on the hand) in place of toes. It had no umbilical cord nor placenta annexed to it. In the place where the umbilicus ought to be, or rather a little higher, there was a small fleshy production about two inches long, which being cut off, appeared white and bloodless, having no marks of blood vessels in it. The flesh of its body appeared bloated, and felt harder than usual, and its joints were so stiff as to be bent with difficulty.

I had no opportunity of examining it thoroughly, but am of opinion it adhered to some part of the placenta of the other fœtus, in the place where it appeared raw and lacerated, and that it received its nourishment *in utero,* by the small blood vessels in that part inosculating with those of the placenta.

Such imperfect productions as this should teach us not to draw too hasty conclusions from preternatural appearances. The dispute whether the fœtus *in utero* receives its nourishment by the mouth or umbilical vessels, or both, has long subsisted, and many arguments have been deduced on both sides the question from the mal-formation of the chylopoietic organs of fœtuses. In the present instance, it is very evident that it received its nourishment neither by the mouth nor umbilicus, for both of them were wanting. It must therefore have received it either in the manner some of the ancients suppose the fœtus to be nourished, viz. by absorbing the nutritious particles through the pores of the body in the same manner as a sponge imbibes water, or else as above conjectured. The latter will perhaps appear the most probable.

J. ELMER.

Philadelphia, September 14, 1773.

A Case

A Case of Disease produced by taking one Ounce of Corrosive Sublimate, successfully treated. Communicated to Dr. Coxe, *by* Dr. Wm. Budd.

December 11, 1799, I received a note, requesting my attendance on a young lady, about 12 o'clock, who was represented to be very ill. I hasted there, and found her walking about the room without much appearance of extreme danger. On conversing with her concerning the subject of her complaint, I found, that twenty-four hours previous to my being called, she had been suddenly seized with violent pains in the stomach, which were directly followed by profuse vomiting of blood, which symptoms still continued at intervals: the abdomen was swelled as large as a woman's, in her seventh month of pregnancy, was very hard, and she had pains at regular intervals, similar to pains in labour; she complained of great thirst, but was not able to retain what she drank any length of time; pulse rather more frequent than usual, but not full: the above symptoms gave me reason to suspect they were owing to some irregularity in the usual periodical discharges, or perhaps she might be pregnant, and the violent pains caused by that. I made further inquiry, in hopes that she would relate some circumstance that would unfold the real cause of her disease, but all to no purpose, for she declared she had not taken any thing that could have produced that effect, and that she had been regular but two weeks before, and experienced good health previously to that period. I directed about twelve ounces of blood to be taken from the arm, as soon as it could be done conveniently, and gave her two grains of opium in pills, hoping she would be eased by them, but they were almost instantly thrown up. 12th. The swelling still continued, attended with great pain in the stomach and bowels; very thirsty, and the bowels have not been freely opened since yesterday; the bleeding of last night produced no relief; I directed the same quantity to be taken again, and to give a table spoonful of the ol. ricini every hour, until the bowels should be freely opened.

13th. The swelling of the abdomen has suddenly disappeared during the last night, and the pain likewise abated, so that the patient got some rest; but this morning the swelling returned with the usual symptoms of pain, and great heat or burning of the stomach, and occasional vomiting or belching of blood; for, as she lay on her back,

she would raise considerable quantities of blood, mixed with water, by a peculiar action of the stomach, without any exertion on her part; the stomach has become so very irritable that she could with difficulty bear to be touched with the hand, or even to sustain the weight of the bed clothes. She now complains of soreness in the throat and fauces, which partly confirms me in what I frequently suspected, that she had taken some poisonous medicine, and that is most likely to be a mercurial poison, from the affection of the mouth and throat.

I ordered the oil to be frequently repeated through the day, with a double view; 1. That it would be most likely to preserve the stomach and bowels from injury, and from any corrosive matter that might be contained in them; and, 2. The good effects that would be derived from its purgative quality: I likewise directed about ten ounces of blood to be taken, and a large blister to be applied to the region of the stomach, as well as one to each wrist, also her drinks to be of the most diluting kind, such as flax-seed tea, barley water, &c.

14th. I found her generally relieved from the pains in the stomach and bowels; the oil operated very well, and the blisters drew considerably; she says the pain is chiefly removed from the stomach, but has a pricking sensation, as she describes, like sword points sticking in it; troubled with fainting fits. This afternoon her pains returned with redoubled violence, and are attended with considerable fever; the affection of the head still continues, as well as the discharge of blood from the stomach. She now thought proper to inform me, through the medium of a friend, that she had taken on the day before I was called, twenty-five cents worth of merc. cor. sub. which from the general price of that medicine, must amount to an ounce or four hundred and eighty grains; her situation now appeared to be desperate; indeed it is strange, that instant death did not ensue from the enormous dose of poison; the pricking pain, as above described, proceeded, as I suppose, from some of the sublimate in its native state in the stomach; I determined therefore to try the effects of a strong solution of vegetable alkali, which would cause a speedy decomposition, and render the sublimate inoffensive; the alkaline solution answered my expectation, for it produced instant relief, and remained longer in the stomach than any liquid she had taken before.

15th. Continues better: ordered the solution and oil to be repeated.

16th.

16th. Swelling has increased very much since yesterday: complains of great pain in the stomach and bowels, throat very sore, and has frequent fits; pulse full and hard. Catamenia made their appearance during last night, and increase to an alarming degree; ordered her to be bled, and take ten grains of alum, with about an equal quantity of sal nitri every two hours till she should get relief, and cold vinegar cloths to be applied to the pubes.

17th. Mœnorrhagia abated, stomach retains its medicine, but is still very sensible to the touch; bowels freely opened; drinks flax-seed tea, and is able to take a small quantity of light nourishment. Ordered small quantities of sweet oil at intervals through the day to be taken, and if the bowels should not be freely opened, to have an injection.

18th. Continues to mend, and takes the oil two or three times a day.

20th. The abdomen frequently swells and becomes very hard, but disappears by the operation of the medicine.

January 21, 1800. I was again sent for to see my old patient, who is afflicted in the manner before described, with an additional swelling in the epigastric region of the left side, and a sense of weight, and hardness, which she says she has felt for several days; the stomach still remains very irritable and frequently rejects what is taken in it. I resumed my former mode of practice, which appeared to me to be the best, and perhaps only means by which I could effect a cure.

22d. I found her relieved from most of her complaints, in consequence, I suppose, of a copious discharge of matter from the stomach, which resembled pus, and which she says had a saltish taste: I directed her to take a moderate portion of nourishing diet, and to use oil, whenever the bowels required opening.

29th. She still continues mending, and frequently vomits the aforementioned matter, which vomiting is preceded by a sense of pain and weight in the stomach.

N. B. I heard from her some time after: she was in good health, except some slight affection of the stomach, which perhaps may be increased by a strong propensity to eat Cayenne pepper since her illness.

Philadelphia, August 1, 1805.

History

History of a Case of Introsusception; and an Account of two Cases of Stricture in the Urethra, removed by Tobacco Bougies; in a Letter to Dr. Redman Coxe, *of Philadelphia.* By William Shaw, M. D.

Dear Sir,

I HAND you the history of a very singular case of introsusception, which you may give a place in your Museum, if you should think it worthy of publication.

J. A. became a patient of mine some time ago; he had fever, with slight paralysis of his lower extremities; for which he was bled and had a mild cathartic given him, and this was repeated on the third day: his diet was ordered to be mild and nutritive. At the end of ten days he appeared so far recovered as to require no more medical assistance.

A few days after he was seized with diarrhœa; he did not make known his complaint until the seventh day. By this time he was very much reduced, but by the operation of a little castor oil, followed by a mild astringent medicine, his diarrhœa was stopped about the end of the third or fourth day, when his appetite began to return, and his strength seemingly to increase.

Four days had elapsed when the paralysis of his lower extremities returned, accompanied with sickness at his stomach, which sometimes amounted to vomiting; feeble and irregular pulse, with his countenance very much dejected; he said he felt as if his bowels were turning from one side of his body to the other, and sometimes they seemed to move from below upwards, so as to affect his breathing; all this time he complained of very severe pain. He was ordered a dose of laudanum (it being late in the evening): next morning he died. I opened the body soon after death; the contents of the thorax were in a healthy state: upon opening the abdomen, I found the stomach, duodenum, and about half of the jegunum very much distended with wind, the other part of the jegunum was filled, or nearly so, with more than half of the ilium next to it. At the commencement of this introsusception, a stricture existed, which nearly closed the intestine: three other strictures were found in the lower portion of ilium; and at each of those strictures a portion of intestine below, was received into that immediately above, one of about six, one of four, and a third of two inches. The whole of the small intestines showed a high degree of inflammation to have existed before death, and a part of the largest

introsusception

introsusception was already in a gangrenous state. The received portion of intestine was very readily withdrawn from the receiving.

Would not the surgeon be warranted in attempting an operation for the cure of this disease where the symptoms so plainly evinced its existence as in the above case? There can be but two material objections urged against the operation, viz. the fallacy of symptoms in diseases, and the fear of subsequent inflammation from exposure of the contents of the abdomen, during the operation, to the influence of the air. The first ought always to be a serious objection while any doubts remained of the presence of the disease; the second ought not to operate one minute as an objection, after the first was removed, and the common means proved ineffectual. We have many instances where, in consequence of wounds, the contents of the abdomen have been exposed for a length of time much greater than would be required for performing the proposed operation, and yet the persons have recovered. One of those dreadful cases came within my knowledge: the man received a wound in the abdomen by falling on a sharp instrument, which passed into the cavity, and let out a portion of intestine; he afterwards walked about three miles with the intestine in his hand, and by having the necessary means used, recovered in a reasonable time.

THE following is the result of two experiments which I made with the nicotiana tabacum in the cure of strictures of the urethra. It is too well known to surgeons, that the disease in question often baffles every attempt to remove it; and I am of opinion that every fact relative to the cure of so painful and so distressing a disease should be made known. If publishing the history of those experiments should be the means of giving relief in a single instance, I shall feel myself amply rewarded for the time I have spent in copying them from my notes.

T. B. laboured under a stricture of the urethra seated near the prostrate gland about nine months. This disease owed its origin to an improperly treated gonorrhœa.

It would be too tedious to relate minutely all the different methods that were employed to remove it: Suffice it to say, that many trials were made with the common bougie; gum-elastic catheter, &c. blood-letting general and local, blistering on the perinæum, several courses of mercury, all the routine of diuretics, &c. and a spare diet. As a last resource the caustic was proposed by my worthy friend

friend Dr. Physick; but previous to the trial with the caustic, I was induced, from having frequently evidenced the very powerfully relaxing effects of the nicotiana in the cure of spasmodic diseases, to make the following experiment, viz.

A small-sized bougie was procured, around which I wrapped a thin smooth leaf of strong tobacco, previously moistened with water, so as to enable me to give it a degree of smoothness, that it might with more ease pass into the urethra. My bougie being first moistened in a decoction of tobacco, was very gently introduced into the urethra down to the stricture, where it was kept moderately pressed against it for the space of about fifteen minutes, when it passed the stricture and went into the bladder: at this time my patient complained of sickness at his stomach, and although it was in the coldest season of the year, a considerable moisture appeared on his forehead; immediately after the bougie was withdrawn he discharged upwards of half a pint of urine, which flowed in a natural stream: the bougie was introduced twice afterwards the same day, and repeated daily for two or three days, without the least difficulty: he has continued free from the disease ever since.

The success I met with in the above case, led me to make trial of my bougie, with a small improvement, in a second and very similar case which occured to me a short time after.—This was an elderly man, who had by times suffered greatly from a stricture which existed about the commencement of the bulb of the urethra. This case had been treated in every respect similar to the foregoing, and with no better success. I made an extract of nicotiana and covered a small bougie with it, and having rendered it smooth, I moistened it in some of the same extract liquified by the addition of water: I made an attempt to introduce it into the urethra, which succeeded after a few minutes gentle pressure with the point against the membrane, which formed the stricture; a similar sensation of sickness and debility took place in this as in the other case, while the bougie was in the penis; the operation was repeated two or three times after this, which produced such torpor and relaxation of the sphincter vesicæ as to render him incapable of retaining his urine; however, this inconvenience was removed by taking a few drops of the tr. canthar. About six months after, I saw my patient, when he informed me that he had remained entirely free from every symptom of the disease during that time.

Philadelphia, November 1, 1805.

A Case of Puerperal Convulsions.

[Extracted from the Philadelphia Medical Museum.]

ON July 28th, 1799, I was requested to visit Mrs. D. aged about forty, of a full habit, labouring under puerperal convulsions. About nine, A. M. yesterday, the waters came away, and every thing went on well, though rather tedious. At nine, P. M. she was safely delivered of twins, which were small, but healthy. The placenta came away soon after, with the loss of but little blood. Her spirits were raised at the happy termination of the labour, in consequence of which she exerted herself greatly in talking with her neighbours; and got out of bed not less than three or four times during the night, to discharge her urine, which came away in large quantity. The gentleman who attended her, told me he left her last evening in the most favourable state. This morning, about nine o'clock, having slept but little, and being very restless during the night, with a slight discharge of the lochiæ, she was seized with a convulsion. Another succeeded in half an hour, and by the time I saw her at one, P. M. she had had no less than seven. She was now insensible, very restless, and frequently sighing, skin hot, pulse quick and strong, face much flushed. Her pulse this morning was very low, and she had taken assafœtida, vol. alkali, and opium, without relief. Her bowels were well opened yesterday. I ordered her to lose ten ounces of blood, which were taken away whilst I remained, with difficulty, owing to the convulsions. She bled freely, and for a short time seemed rather easier. In about ten minutes she had a fit, continuing ten or fifteen minutes, and terminating in an apoplectic stertor, with foaming at the mouth. During the fit the pulse was full and strong. I ordered an emollient glyster, with warm fomentations to the abdomen; and directions to take away ten ounces more of blood, if the pulse kept up, and the convulsions did not moderate.

At six, P. M. I found her more quiet, and sleeping easier; has had four more fits, at longer intervals; and at times she appeared to be sensible, by calling for her children, and by knowing her attendants; the skin is cooler, and is more generally moist; slight appearance of the lochiæ. The pulse kept up so much, that she lost the blood as I had directed between three and four, P. M.; pulse still strong and quick, above 140 in a minute. The injection was retained. If the symptoms do not moderate, let her

her lose twelve ounces of blood in the course of the evening, and apply a large pair of blisters to the ankles. The face is less flushed, and the head appears relieved, as she has less of the stertorous breathing, and less general inquietude. The blood drawn was not sizy. I am told she is rather intemperate in health.

29th, nine, A. M. Four fits, but less violent during the night; she is more sensible, though restless; blisters rose well; lost ten ounces of blood in the evening, which is not sizy; no appearance of lochiæ; sleeps more easy. During the night her bed broke down, and she was obliged to sit up in a chair till it was mended. Passed her water several times, but has had no stool; considerable pain of abdomen, but no sickness or vomiting; breasts rather turgid; pulse still active and strong, and 130 in a minute; tongue white and much bitten during the convulsions. Change her linen, &c. daily; continue fomentations to the abdomen; bleed to ten ounces if the pulse keeps up, and let her drink punch made of cremor tartar, If her bowels are not soon open give moderate doses of soluble tartar or Glauber's salts.

Eight, P. M. I found her in a composed and sound sleep, pulse 116, and more moderate; skin cooler and less flushed; one copious stool, with great relief. At three, P. M. the pulse had risen so greatly that ten ounces of blood (not sizy) were taken away. Breasts considerably hard. Apply the children to them. Omit the cream of tartar, as she has taken about two table spoonfuls. Barley water or molasses and water for her common drink, with ℈ij. of nitre to each quart. Has had no convulsions Slight appearance of the lochial discharge. Appears more sensible than heretofore. Before the last bleeding she complained of very great sensibility of the skin; even tying up the arm to bleed gave considerable pain. This has subsided. Repeat the bleeding if the pulse rises.

30th. Bowels well opened during the night. Since when, she has been much disposed to hysteria, laughing and talking continually, except whilst sleeping, which is tolerably composed, No convulsions. Breasts more turgid. Apply the children to them. Lochiæ increase. Complains of pain in her side and back Bathe the parts with volatile liniment. No pain of abdomen. Urine natural. Pulse from 112 to 120, and more moderate. Bleeding not requisite in the night. Tongue white and moist, and much injured by biting it during the convulsions. Ordered nitre grs. x, and one-eighth of a grain of tartar

tartar emetic every two hours; and if the pain of the side increases apply a blister, and bleed to six or eight ounces.

31st. Appears much better. Lochiæ in small quantities. Pain of side relieved by the embrocation. Two stools last night and one this morning with much relief. Pulse nearly 130, but moderate. Tongue white and moist. Talked a great deal yesterday, and saw too many friends. Pain of abdomen is gone. Slept but little till the morning. Continue the nitre and tartar emetic, and use gruel without wine, for nourishment.

August 1st. Slept well by the aid of ten drops of laudanum. Much better. Milk increases, and lochiæ in usual quantities. Pulse 100, and moderate. Tongue cleaner. Sat up yesterday in the afternoon. Urine frequent. Complains of her bruises. Continue nitre, &c. and take broth.

3d. Convalescent. In less than a week from this period she was down stairs.

Account of the Efficacy of Sugar of Lead, in a Case of Epilepsy. In a Letter to Dr. R. Coxe, of Philadelphia. By Dr. T. R. P. Spence, *of Accomac County, Virginia.*

Sir,

THE duty I owe society, the medical faculty in general, and Drs. Church, Wistar, and Rush in particular, induces me to make this communication, being a history of my own case of epilepsy—requesting for it, if you see proper, a place in your Museum.

My first attack was in the 23d year of my age. On October 13th, 1803, as I was riding, I fell from my horse, without any premonitory symptom whatever, and remained insensible (by estimation of the person with me) half an hour. The fit was succeeded by a violent pain in my head, a full, slow, and hard pulse, not exceeding sixty-four strokes in a minute. Being confident it was an epileptic attack, from being hereditarily predisposed,* I immediately lost sixteen ounces of blood, and pursued an antiphlogistic course, tolerably strict, until my system was reduced

* My elder brother was first attacked at about the same age; another had it from his infancy, and died about the age of puberty.

reduced pretty considerably; I then begun with the cuprum ammoniacum, and continued some time; but was subject to attacks, or fulness and pain in my head, at every full and change of the moon; which leads me to believe the human system, particularly in this disease, is subject to lunar influence; for when I did not recollect the full and change, I could discover it by my feelings, particularly by a sensation of fulness and pain in my head.

I continued more or less subject to attacks of the same kind until 27th of May, 1804: I went to Philadelphia, and consulted the above mentioned medical gentlemen, who recommended me to persevere in the plan I had adopted, and to make trial of mercury, zinc, and lead. I first began with mercury, and found that it would suspend the disease, particularly the pain in the head, for two months; but when the system was unimpregnated with mercury, would immediately have an attack, at the next lunar period; which induced me to keep up for seven months, a pretty considerable ptyalism, and twice a salivation. I must also observe, that I used bleeding once a month, regularly. My pulse during this time was from 78 to 90, but seldom exceeded 84 in a minute.

I experienced no inconveniency from the mercury, more than the sore mouth. There was a greater discharge of urine during its use; and that quite transparent, which had not been the case for three years previously.

Having considerable practice during the autumnal months I found that riding on horseback in the sun, at this season, produced great fatigue, and operated as an exciting cause, affecting my head very much with pain. I had only four fits from the 27th May until the 6th December of the same year. All kinds of exercise producing fatigue had similar effects; but I think shooting was most injurious. The report of a gun would affect my head and pulse. I was pleased with the amusement, and undertook it on horseback to prevent the fatigue of walking; but the report was still injurious. I was most subject to the complaint after going to bed, during the inaction of sleep. In September 1804, I was so much reduced by the regimen and medicine, that I left off the mercury during this month, and tried the cold and shower bath; but with considerable disadvantage. Two attacks during this month. I then continued the medicine, October and November, and had another fit after gunning, on the 6th of December.

All hopes of recovery being nearly extinguished, and life

life irksome, I determined to give the sugar of lead as fair a trial as I had done the mercury, and to push it to a considerable extent, let the consequence be what it might. The good effects of its use in children by Dr. Rush, gave some encouragement; while the insignificancy attending its use in adults, mingled rather more fears than hopes. In several cases in which the Doctor used it, not one case was cured; and only one was suspended a few weeks. I therefore, with reluctance, began and took of sacch. saturni one-fourth of a grain three times a day, and increased the dose in one week to one grain; and continued with that for the space of two weeks, and then increased it to eight grains twice a day; and continued taking it in this quantity three or four weeks, with, I may say, happy effects; not one symptom of my former complaint all this time; my pulse from 78 to 84 in a minute.

The sensible effect of the lead for the first two weeks, was only a little costiveness; afterwards, a sponginess of the gums came on, with a dark livid appearance around the dentes incisores; small flow of saliva; fœtid breath; although my teeth were loose, my mouth was not sore; a great increase of urine, more than when I took mercury; costiveness, sometimes for two days, and then the fæces quite black and compact; my upper extremities, particularly my elbows, affected with pain in the morning.

Although apprehensive of serious consequences, I still determined to go on with the medicine, and lose some blood to assist it; accordingly, on the evening of the 24th January I lost sixteen ounces; my arm bleeding accidentally the next morning, I lost, by estimation, eleven ounces more. I now, for the first time, lost all appetite for food, and continued three or four days without eating any thing; this was succeeded by pain in the epigastrium, extending down below the navel, in the spine, and region of the liver, which continued ten days, very excruciating indeed; I took laxatives, opiates, in large and repeated doses, together with a long catalogue of medicines. without relief for the time above specified.

The pains continued very obstinate, but less severe, about six weeks; those in my arms were not gone, and extending to my legs, rendered standing impracticable. During the continuace of these pains I was bled five times; the blood after standing twelve hours had very little or no serum; and the crassamentum was of a dark livid appearance.

After trying almost every medicine that imagination could

could suggest, and being in a state of slow convalescency I found the greatest effectual relief from chalybs ppt. and myrrh; this first restored my appetite.* Since recovering my health, my stomach appears to be so much contracted, that I cannot eat more than two-thirds or half as much as I could, or was wont to eat before, without a sensation of considerable fulness. During the artificial disease from lead, my pulse did not exceed 60 or 64 strokes in a minute; and since, from 78 to 84 is its natural standard.

It has now been seven months since I began with the internal use of the sugar of lead; since which time I have not had the least sign of my former epileptic complaint; except once, after fatigue in the hot sun, I had considerable pain in my head.

I was bled every month during the time I used mercury, without any sensible relief from it; and am led to believe it an injurious plan to pursue in this complaint, from the following consideration. Hemorrhage, or blood-letting to excess, will produce plethora, and I believe where that is used in a healthy state of the system, as in epilepsy where there is no *general* morbid excitement, it must do harm by occasioning a predisposition. Moreover, if it has any good effect, that good effect is lost by not attending particularly to the operation at a particular period of the moon; which, when neglected, renders the attacks more frequent and more violent.

Queries.—Whether or not has my taking the sugar of lead so soon after a course of mercury, produced those happy effects of relief, which were not obtained in adults by the use of the same medicine?

Whether or not have the good effects of the medicine proceeded from its direct sedative operation; or from its contracting the stomach, and by that means obviating plethora?

What

* I was very sanguine in my expectations from opium, on hearing my friend Dr. I. Stevenson say, " That he attended the case of two children, one seven, the other nine years old, who eat a quantity of white lead for chalk: they both had very severe pains in the abdomen, occurring at intervals; their skins were remarkably yellow; their bowels were nearly natural or rather costive; laxatives produced very black stools, but no alleviation of pain; opium was so good a palliative that he had recourse to nothing else; it seemed plainly indicated, neither of their pulses beat oftener than 36, and very soft; opium rendered the intervals of ease longer and longer, until the pains vanished altogether in about five or six days."

What is the *modus operandi* of saccharum saturni taken internally? Is it a sedative or a stimulant?

Perhaps the pen of some speculative theorist might be advantageously employed in answering these queries. I am content with having experienced the beneficial effects of the medicine, and giving a narrative of facts and circumstances which led me to it.

These facts I have thrown together without much regard to order, or systematic arrangement; they are related with all the fidelity my memory will admit of; I wish I could have avoided reasoning on them? but as a celebrated author observes—" As thorny as the subject appears we must approach and handle it;" perhaps they may serve as one round in the ladder, by which we may finally climb to the summit of medical science.

July 28, 1805.

An Account of a Case of Wounded Brain. By John Syng Dorsey, M. D.

[Extracted from the Philadelphia Medical Museum.]

ON the 19th October, 1805, I was requested to visit in consultation with Dr. Gardner of Derby, a boy aged about twelve years, who in the morning had received a severe blow from the hoof of horse. As he was seven miles from the city, I did not see him until six hours after the accident had happened. I was informed that he was stunned by the blow, but soon recovering, rose upon his feet and walked; he had not however proceeded far, before he became sick, and fell. He was taken up and carried into the house, which was but a short distance from the place where the accident occurred. A wound was observed upon the back part of the head, just above the left ear, from which some blood flowed, but the quantity lost was inconsiderable. When he was put into bed he became sick, and vomited twice.

At six in the evening I saw him, and found him free from pain, nausea, and coma: he was lively, and did not appear to have suffered much. His pulse was somewhat depressed. Upon examining the head, a wound, an inch and a half long, situated about an inch from the lambdoidal suture anteriorly, exposed to view a large and very deep indentation of the skull; the bone was not thicker than the pasteboard used to cover books, and a consider

able portion of it was beat in half an inch below the remaining unbroken portion, so that it was easy to introduce the finger between the skull and dura mater, at this part. Notwithstanding all this injury, there was no nausea, no affection of mind, and very little apparent disturbance to the functions of the patient: there seemed, however, no propriety in suffering the bone to remain depressed, as in all probability, it would have occasioned dreadful consequences.

A free incision was made through the scalp, enlarging very considerably the original wound. The posterior and inferior part of the parietal bone was found broken in pieces, and pressed upon the brain. As there was no opening large enough to admit an instrument to remove the depressed pieces, it became necessary to apply the crown of a trephine to the solid part of the skull. It was applied as near as possible to the fracture, and a segment of bone was removed, forming rather more than a semicircle. This opening enabled me to introduce the levator and to raise the depressed pieces to their proper level. A fragment of bone, very sharp, two-thirds of an inch long, had been forced through the dura mater, and was found imbedded in the brain; a small portion of it projecting upwards, was seized with a pair of forceps; and when it was removed, a considerable discharge of blood followed, but a dossil of lint put an end to the hemorrhage: a soft, light poultice was applied, and an abstinence enjoined from all food, excepting toast and water. Dr. Gardner concurred fully in the propriety of copious depletion, and conducted the patient to a complete and speedy cure. The wound healed without difficulty, and the patient now enjoys good health.

The instances of recovery from wounds of the dura mater are sufficiently rare, to warrant us in recording every encouraging case.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IT never, I believe, can be asserted of any novel discovery, that it was sanctioned by public approbation, "nemine contradicente," (an observation fully confirmed on the

the subject of "Burns and Scalds.") Much unnecessary trouble might be spared, if the theorists could but be induced to recollect, that much (as was judiciously hinted by a correspondent in your *last*) "depends on the constitutional variety of the subject," and as much on the different stages or degrees of the accident. If no other inconvenience is sustained than a slight vesication of the injured part, no remedy could be more aptly introduced than the refrigerant application of cold water. But, when the common integuments are so burnt that the cuticle is entirely destroyed, and the parts immediately affected with great pain and vesication, the sedative effects of cold Ablution would be highly improper, and the stimulant qualities of the terebinthinate application much preferable.

I am fully convinced that any discerning mind, open to conviction and unbiassed by prejudice, will readily perceive the impropriety of using sedative applications in constitutions, where, from natural inactivity, every thing stimulating is required, in order to counteract the inanition of the system. It is far from my desire or intention to take from Dr. Kinglake's valuable discovery, any of the credit to which it is deservedly entitled; on the contrary, whenever the general tenor of the constitution will admit of topical refrigeration, there is no treatment, I conceive, so well calculated to lessen the pain of the patient, and diminish the perplexity of the practitioner, as cold ablution. And it is to be hoped, that Dr. Kentish will rest satisfied, that *his* plan of treatment is considered *equally* efficacious with that of Dr. Kinglake, provided they are *alternately* and *judiciously* adopted.

Various other modes of treatment have been recommended for the cure of this accident; while some treat it as a species of inflammation, others recommend the injured part to be applied as near the fire as the patient can bear, and repeat it while any sense of heat or pain remains, upon a supposition that, by this method, the stagnating fluids are repelled into their proper channels, and the vesication, or other consequences, thereby prevented. It should seem, however, sufficient to confine ourselves to the two former applications of heat and cold, being convinced that the *respective* principles upon which they act, are as rational as the relief they afford is permanent.

I am, &c.

MEDIUM.

Sept. 4, 1807.

An Account of a Case of Fever and Pain from Rheumatism being relieved by the Discharge of electric Sparks from the Body. By FRANCIS JOHNSON, Esq. near Philadelphia.

[Extracted from the Philadelphia Medical Museum.]

FOR many years, I had, from a variety of observations made upon my own *person* and *health*, conceived, that *good health* depended upon an exact equilibrium of the electric fluid being kept up within my system. I frequently found, on experiment, that if my pulse was languid, and my spirits depressed, my frame received with avidity (if I may so express myself) the electric fluid from any proper apparatus; but until about the years 1791 or 1792, I never contemplated that my health depended so much upon this fluid (if a redundancy of it was within me) being immediately ejected or drawn out.

In the fall of that period, for two successive days and nights, I felt feverish, with a total loss of appetite, a parched skin, with violent rheumatic pains in my head, breast, back, and stomach. Late in the evening of the last day, being frosty weather, I drew from my pocket a new silk handkerchief, which I had just purchased with some others of the like kind, then in another pocket; and as I entered my own door, being in great pain, I rubbed my head with it with much agitation and exertion, and immediately *perceived* and *heard* the electric sparks proceed from thence *most abundantly*. I then drew the handkerchief frequently through my hands from one extremity of it to the other, during all which time, *it*, or *I*, emitted a continued stream of *sparkling*, *crackling*, and *audible* fire.

As soon as I entered my common back parlour, or apartment which my family usually occupied during the fall and winter, I luckily met with a number of my friends and connections, some of whom, it is true, were *juvenile*, others however were of *maturer* years and of scientific knowledge, to whom I communicated this remarkable phenomenon, and whom I requested to make the like experiment with the *handkerchief* which I had done. Accordingly several of them did so; but none of them having fever, any chronic complaint, or listless or restless moments, but being all in perfect health, (I repeat it) *none of them* did, or could, produce the *like effect*.

An

An hour only elapsed, until I exhibited in the same neighbourhood, among three or four friends, the extraordinary manner (as already stated) in which I could emit the *electric fluid* through the medium of my *manual* operation on the silk handkerchief. At a small distance from the place of my last operation (if I may so call it), I met some others of my associates at the house of one of my most particular friends. At this plaee I felt *much better* in point of health, that is, my fever had considerably abated, the irritation of my nerves had subsided much, and my rheumatism (the principal cause of my complaint) was nearly removed; hence the *electric fluid* or *fire*, or by whatever other name it may be expressed, was not so vivid or luminous or abundant as it had been, yet still I performed the operation as heretofore stated, while those in *good health* around me could not do so. On my return home the same evening, I felt myself perfectly relieved from fever and pain, and with all my repeated endeavours could not emit one single spark of electricity. From the foregoing data, my corollary is—"*That good health depends much upon an exact equilibrium being kept up, of the electric fluid within our system.*" Whether any, or what *effects*, may be produced from the relation of the *facts* which are here stated, I know not. My sincere wish is, that they may prove useful to those persons whose study and business it is to collect and apply such facts for the improvement of the healing art, and the benefit of mankind.

Botanical Description of British Plants.

[Continued from Vol. xviii. page 270—274.]

13. Sisymbrium. *S. sophia.*

Ang. Flix-weed-water-cress.

Gen. Desc. As above.

Spec. Desc. *Petals* smaller than the cups. *Leaves* doubly compound, winged. *Pods* long, stiff, crooked. *Seeds* yellow. *Bloss.* yellow. *Walls, rubbish.* Bl. July.

Use. This plant has been sometimes prescribed in hysteric and dysenteric cases; and its seeds are given to destroy worms. The pods retain the seeds all the winter, and small birds feed upon them. Cows and sheep eat it; horses and goats are not fond of it; swine refuse it.—*Withering.*

14. Erysimum. *E. officinale.—E. vulgare. Iris sive E. vulgare.*

Ang. Hedge mustard, or worm seed. Bank cresses. Scrambling rocket.

Gen. Desc. Pod straight, strap-shaped, exactly four-sided. Cal. closed. Summit a knob.

Spec. Desc. *Pods* pressed close to the spike stalk, rather conical, hairy. *Leaves* notched, slightly woolly; *lower*, winged; *upper* halberd-shaped. *Stem.* cylind. frequently purple, hairy, branched. *Flowers* in long spikes, terminating, yellow. *Germ.* cylind. tapering upwards. *Sum.* flat, with a shallow nick. *Seeds* oblong.—*Road sides, rubbish, &c.* Bl. May, June.

Use. The taste of this herb is somewhat acrid, especially the tops of the flower-spikes. Its seeds are considerably pungent, and appear to be nearly of the same quality with those of the mustard, though weaker. This plant is said to be attenuant, expectorant, and diuretic; and has been strongly recommended in chronical coughs and hoarsenesses. It is mentioned by Rondeletius, that a hoarseness, occasioned by loud speaking, was cured in three days by means of it: other medical writers also have borne testimony to its good effects in this disorder, and Dr. Cullen for that purpose recommends the juice mixed with an equal quantity of honey or sugar: in this also it is a useful remedy in ulcerations of the mouth and throat. In most cases of disease, perhaps its seeds, as more pungent, should be preferred to its leaves.—*Woodville.* "Hedge mustard is beyond any thing in ulcers of the throat; this was found by experience by the Hon. Harry Gray, Esq. when all advice of Doctors and Surgeons availed nothing: this from his own mouth." *MS. note in a copy of Parkinson, which formerly belonged to Mr. Saunders, surgeon at Stourbridge.* It is warm and acrid to the taste; and, when cultivated, is used as a spring pot herb. Birds are fond of the seeds. Sheep and goats eat it; cows, horses, and swine refuse it. *Withering.*

15. Erysimum. *E. barbarea.*

Ang. Winter cresses. Winter rocket. Rocket worm seed.

Gen. Desc. As above.

Spec. Desc. *Pods* indistinctly four-cornered, long, slender, slightly flatted. *Leaves* lyre shaped, terminating segment circular, half embracing the stem. *Stems* strong, eight-furrowed. *Bloss.* yellow.—*Walls, river banks, watery places.* Bl. May, October.

Use.

Use. The leaves are used by the common people in Sweden in sallads, early in the spring and late in the autumn: they are there also boiled as kale: and is sown in gardens for an early spring sallad.—*Linn.* In England also it is cultivated for the same purpose by the name of French cress. Cows eat it; sheep and goats are not fond of it; horses and swine refuse it.—*Withering.*

16. ERYSIMUM. *E. alliaria.—Alliaria.*

Ang. Jack-by-the-hedge. Sauce alone. Garlic worm seed. Stinking hedge mustard.

Gen. Desc. As above.

Spec. Desc. *Leaves* heart-shaped, bluntly and irregularly serrated, alternate, on leaf stalks. *Stem.* cylind. *Flowers* in a corymbus. *Ditch banks, shady places.* BL. May.

Use. The leaves have moderate acrimony, and a strong flavor resembling that of garlic or onions; they give the same kind of taint to the breath as those roots, and have been used for the same culinary purposes: on drying, the sensible qualities are lost. Its medicinal character is that of a powerful diaphoretic, diuretic, and antiscorbutic; it has been deemed useful as an expectorant and deobstruent, in humoral asthmas, and other cases of dyspnœa. It has also been much esteemed as an external application, to promote suppuration. Boerhaave (*Hist. Plant. Lugd. Bat.* 437) cured a gangrene of the leg, arising from a neglected fracture and contusion, by applying the bruised leaves with wine.—*Woodville.* An outward application of the leaves has been recommended in gangrenous and cancerous ulcers.—*Lightfoot.* The seeds excite sneezing.—The leaves are eaten by the Prussians along with salted meats in the spring; they are useful with lettuce, and the colder sallads. In Wales it is much used as a frying herb. When it grows in poultry yards, the fowls eat it, and it gives an intolerable rank taste to their flesh.—Cows and goats eat it; horses, sheep, and swine refuse it.—*Withering.*

17. ERYSIMUM. *E. cheiranthoides.*

Ang. Treacle wormseed.

Gen. Desc. As above.

Spec. Desc. *Stem* v. much branched, 1 to 2 cubits high, rough, stiff, straight, scored. *Leaves* spear-shaped, oblique, waved and toothed, entire, roughish. *Pods* expanding quadrangular. *Seeds* oblong, yellow brown, intensely bitter. *Bloss.* small, yellow. *Sum.* small, scarcely divided. *Osier-holts, river banks, corn fields.* BL. July.

Use.

Use. The seeds are used by country people to destroy worms; and with good effect.—Horses, cows, sheep, goats, and swine eat it.—*Withering.*

18. Brassica. *B. napus.*

Ang. Wild navew. Rape. Nape. Rape cabbage.

Gen. Desc. Cal. upright, close. Glands, one between each shorter stamen and the pistil, and 1 between each pair of longer stamens and the calyx. Seeds globular.

Spec. Desc. *Root* a regular continuation of the stem; spindle shaped. *Root-leaves* lyre-shaped, smooth; *stem-leaves* heart-shaped, oblong, embracing, toothed, smooth, sea green. *Stem* branched, about 2 feet high, smooth, *Cal.* expanding, yellow green. *Summit* a flatted knob. *Pod* often with three or four warty excrescences. *Bloss.* yellow.—*Ditch banks, corn fields.* Bl. May.

Use. The roots of the cultivated variety may be eaten like turnips, but they have a stronger taste: its seeds, which are called cole seed, afford a large quantity of expressed oil, which is known by the name of *Rape oil.* What remains after the expressing of the oil, is called *Oil cake,* and is used for fattening oxen. In Norfolk these cakes are used as manure, broken in pieces, and strewed upon the land; it is thought to be very efficacious, and is sold for 4l. to 6l. per ton; half a ton is laid on an acre.—*Woodward.* Cows, goats, and swine eat it.—*Withering.*

19. Brassica. *B. rapa.*

Ang. Turnip-cabbage. *Var.* Turnips. Knolles.

Gen. Desc. As above.

Spec. Desc. The *Root* a regular continuation of the stem, round, depressed, fleshy, (in *var.* oblong), *root-leaves* rough, indented. *Cal.* and *Bloss.* yellow.—*Corn fields.* Bl. April.

Use. The roots are either eaten raw, boiled, or roasted; pepper is commonly used with them. They relax the bowels, and are supposed to sweeten the blood; they are hurtful to pregnant women, or to hysterical persons, and those who are subject to flatulencies.—The juice well fermented, affords by distillation an ardent spirit. The rind is acrimonious. The roots kept in sand or in a cellar during the winter, send out white shoots and yellowish leaves, which being rather sweet and not unpleasant to the palate, are used as sallad, when other esculent herbs are not to be had. But the greatest use of turnips is in feeding oxen and sheep in the winter.—*Withering.*

20. Brassica. *B. oleracea.*

Ang.

Ang. Sea cole-wort. Sea cabbage. Common cabbage.

Gen. Desc. As above.

Spec Desc. *Root* a regular continuation of the stem, cylind. fleshy. *Stem-leaves* much waved, variously indented, sea-green, often with a mixture of purple; the *lower* egg-shaped, sitting; the *upper* mostly strap-shaped. *Cal. leaves* egg-shaped, broad, yellow. *Flowers* large, yellow. *Pods* short, swelling. *Seeds* dusky purple.—*Cliffs on sea-coast.*

Use. Early in the spring, the sea cabbage is preferred to the cultivated kinds, but, when gathered on the sea coast, it must be boiled in two waters, to take away the saltness. The roots may be eaten like those of the preceding species, but they are not so tender. All the different varieties of the cultivated garden cabbage, which are much in use at our tables, originate from this. The red cabbage is chiefly used for pickling; in some countries the white cabbage, when full grown in autumn, is buried, and thus preserved through the winter. It is a common practice in Germany to cut them to pieces, and along with some aromatic herbs and salt, to press them close down in a tub, where they soon ferment; they are then eaten under the name of sour crout. Cabbage is apt to be infected early in the year with an insect called the Chrysomela saltatoria, and afterwards the Papilio Brassica; it may be preserved from the former, by strewing the ground with soot; and from the other by whipping the plant with the green boughs of alder. Cabbages sowed or planted for several years together in the same soil, become smaller in the head, and the roots knotty; which is occasioned by the larvæ of flies.—Cows grow fat upon the leaves.—*Withering.*

21. Sinapis. *S. arvensis.*

Ang. Chadlock. Wild mustard, or charlock. Corn-cale.

Gen. Desc. Cal. expanding. Bloss. claws upright. Glands between the shorter stamens and the pistil, and between the longer stamens and the calyx. Pod beaked, opening valves shorter than the partition.

Spec. Desc. *Pods* with many angles, swoln and bunched out by the seeds, smooth, longer than the two-edged beak. *Cal. leaves* slightly compressed, spreading, yellow. *Stem* scored, reddish, hairy. *Leaves* harsh, deeply indented and serrated. *Petals* yellow. *Seeds* brown.—*Corn-fields.* Bl. May.

Use. In Scandinavia this plant is boiled and eaten as cabbage:

cabbage: and in Ireland the tender tops are collected for the same purpose. Cows, goats, and swine eat it; sheep are very fond of it; horses generally refuse it.—*Withering.*

22. SINAPIS. *S. nigra.*—*S. sativum.* *S. rapifolis.*
Ang. Common mustard. Black mustard.
Gen. Desc. As above.
Spec. Desc. *Pods* smooth, laid flat to the spike-stalk, short, parallel; sometimes slightly hairy, but the *beak* smooth. *Stem* branched, cylind. scored, upper part smooth. *Root-leaves* rough. *Stem-l.* smooth; the *upper* frequently simple, spear-shaped, toothed. *Fruit-st.* short. *Cups* and *Bloss.* yellow.—*Corn-fields, road sides.* BL. June.

Use. The seeds of this plant, and those of the S. alba, (which are preferred by the Edinb. Coll.) manifest no remarkable difference to the taste, nor in their general effects, and therefore answer equally well, both for the uses of the table and the purposes of medicine; they have an acrid pungent taste; and when bruised, this pungency shews its volatility by powerfully affecting the organs of smell. Mustard is considered to promote appetite, assist digestion, attenuate viscid juices, and by stimulating the fibres, to prove a general remedy in paralytic and rheumatic affections. Taken in considerable quantity, it is found cathartic and diuretic, and therefore useful in dropsy. "An ordinary table spoonful of the unbruised seeds is not heating to the stomach, but stimulates the intestinal canal, and commonly proves laxative." *Cullen ii.* 171. It has been recommended as an antiscorbutic: the seeds bruised and mixed with white wine, cured an inveterate and fatal scurvy which had arisen during the confinement of a siege. *(See Ray Hist. p.* 803.*)* Though it is said by Haller, that the use of mustard disposes the humours to putrescency and injures the stomach; *(See Hist. Stirp. Helv. n.* 465,*)* an opinion into he was probably led by the erroneous supposition that it contained volatile alkali: *(See Cullen, l. c.)* The great pungency is to be ascribed not to volatile alkali, but to the essential oil contained. Bergius found mustard of great use in vernal intermittents; a spoonful of the whole seeds, taken three or four times a-day, during the apyrexia; when the disease was obstinate, he added flower of mustard to the bark. Externally the seeds are used as a stimulant, or sinapism; when moistened with vinegar and kept for a day, the powder becomes considerably more acrid, which should be attended to in its external use.—*(Cullen.)* It may most conveniently

veniently be given unbruised, to the quantity of a spoonful, or half an ounce to a dose.—*Woodville.* The seeds reduced to powder, make the common mustard so much in request at our tables; they yield a considerable quantity of expressed oil, which partakes but little of the acrimony of the plant. Taken inwardly in the quantity of a meat spoonful or more, they gently loosen the bowels, and are of service in asthma, chronic rheumatism, and palsy. The powdered seeds curdle milk, and give a strong impregnation to boiling water; this infusion taken in a considerable quantity is emetic; in smaller doses, an useful aperient and diuretic. Cataplasms formed with the powdered seeds, crumb of bread and vinegar, are very commonly applied to the soles of the feet, as stimulants, in fevers which require such treatment; they are used with advantage, topically applied in fixed rheumatic and sciatic pains. Wherever a strong stimulus is required, that acts upon the nervous system, without exciting much heat, there is none preferable to mustard seed.—*Withering.*

Note. The S. alba, or white mustard, *with rough pods*, is commonly sown for early sallading. The seeds have the same properties as the above.

23. RAPHANUS. *R. raphinistrum.*

Ang. White flowered charlock. Wild radish.

Gen. Desc. Cal. close, upright. Nect. glands two between the shorter stamens and the pistil, two between the longer stamens and the calyx. Pod round, but protuberating, with cells, and nearly jointed.

Spec. Desc. Pods round, jointed, smooth, one cell, joints falling off separately. *Stem* rough, sea green, branched from the bottom. *Leaves* sometimes hairy; *lower* lyre-shaped, wings alternate, heart oblong, lowermost very small, odd one large, rounded, scolloped; *upper* oblong-spear-shaped, scollop-serrated. *Leaf-stalks* and *calyx* hairy. *Petals* yellow, white, violet, or pale red, always with dark veins.—*Among corn.* BL. June, July.

Use. In wet seasons it grows in great quantity amongst the barley in Sweden, and it deserves to be remarked, that in those provinces, and in those seasons wherein this plant abounds, the common people, who eat barley bread, are afflicted with very violent convulsive complaints. *Aman. acad. vi.* 430.—Horses eat it; cows refuse it.—*Withering.*

CLASS

Class XVI. Monadelphia.

Monadelphia. Triandria.

1. Juniperus. *J. communis.* *J. vulgaris.*

Ang. Juniper tree.

Gen. Desc. Diæcious. M. Cal. a scale of the catkin. Bloss. 0. Fem. Cal. 3-div. Petals 3. *Pistils* 3, drupa juicy, closed, one-celled, many-seeded; with three tubercles formerly the calyx.

Spec. Desc. *Leaves* three together, expanding; sharp pointed, longer than the berry. *Berry* continuing 2 years green, at length blackish purple. *Anthers* under the lateral scales often five. *Bark* reddish.—*Heaths.* Bl. May.

Use. Both the tops and berries are directed for use in our Pharmacopœias, but the latter are usually preferred; and are generally imported from Holland and Italy. The berries have a moderately strong not disagreable smell, and a warm pungent sweetish taste, which is followed, when long chewed, by considerable bitterness: the sweetness resides in the juice or soft pulpy part of the berry; the bitterness in the seeds; and the aromatic flavor in oily vesicles, spread throughout the substance both of the pulp and the seeds, and distinguishable even by the eye. *See Lewis M. M. p.* 362. They are chiefly used for their diuretic effects; they are also considered to be diaphoretic, stomachic, and carminative. Of the efficacy of juniper berries in many hydropical affections, there are various relations by physicians of great authority, as Du Verney, Hoffman, Boerhaave, Van Swieten, &c. but authors are not agreed which preparation is the most efficacious. *See Cullen M. M. ii. p.* 187, *Hoffman, &c.* But as they are now seldom relied on for the cure of dropsy, and only called to the aid of more powerful remedies, it is justly observed by a modern author, (*Duncan New Ed. Disp.*) "that, perhaps, one of the best forms under which the berries can be used is a simple infusion; this either by itself, or with the addition of a little gin, is a very useful drink for hydropic patients." Medical writers have also spoken of the utility of Juniper in nephritic cases, uterine obstructions, scorbutic affections, and some cutaneous diseases; and in the two last mentioned complaints, the tops and wood are said to have been employed with more advantage than the berries. Of the wood and tops the virtue is described by Bergius, as diuretica, sudorifica, mundificans; of the berries, diuretica, nutricus, diaphoretica.

Linnæus

Linnæus tells us, that the Laplanders drink infusions of these berries, as the English drink tea and coffee; and that the Swedes prepare a beer from them, which is in great estimation for its diuretic and antiscorbutic qualities—*Woodville.* The berries likewise afford a pleasant wine.—*Du Hamel.* The berries, which are two years in ripening, afford, when bruised, a pleasant diuretic liquor, but it is not easy to prevent it from turning sour: it is esteemed a good antiscorbutic. The Swedes prepare from the berries an extract, which by some is eaten for breakfast, but it is fitter for a medicine than for food. The spirit impregnated with the essential oil of these berries is every where known by the name of Gin, Geneva, or Juniper water; but there is great reason to believe that the gin usually sold in England, instead of the genuine Geneva imported from Holland, is nothing but the common fermentacious spirit, imbued with turpentine or other materials to give it a flavour. Gum Sandarach, commonly known by the name of Pounce, is the product of this tree, exuding through the crevices of the bark, or the perforations made by insects. The wood is hard and durable: the bark may be manufactured into ropes.—It grows in fertile or in barren soils; on hills or in valleys; in open sandy plains or in moist close woods: its trunk on the sides of hills grows long, but, on rocky mountain tops and on bogs, it is little better than a shrub. It is easily transplanted and bears cropping, but the grass will not grow beneath it; the avena pratensis destroys it. Horses, sheep, and goats eat it.—*Withering.*

(To be continued.)

An Account of the Practice of one of the Physicians of the Westminster General Dispensary, and of the Western Dispensary, from the 20th of August, to the 20th of September, 1807.

ACUTE DISEASES.		CHRONIC DISEASES.	
Cholera - - -	12	Diarrhœa - -	16
Pleurisy - - -	3	Colic - - -	2
Acute Rheumatism -	2	Dysentery - -	3
Synochus - -	3	Gastrodynia - -	7
Gout - - -	1	Enterodynia - -	3
Apoplexy - -	1	Dyspepsia - -	10
Tic Douloureux -	1	Constipation - -	3
Hooping Cough -	2	Calculus - - -	1
Acute Diseases of Infants	9	Dysure - - -	4

Lumbago

Lumbago - -	4	Hydrocephalus -	3
Sciatica - - -	2	Ulcerated Sore Throat	3
Chronic Rheumatism	3	Gonorrhœa - -	4
Pleurodyne - -	2	Abortion - -	2
Cough and Dyspnœa	10	Leucorrhœa - -	4
Pulmonary Consumption	6	Prolapsus Uteri -	1
Scrophula - -	2	Scirrhus Uteri - -	2
Asthenia - -	12	Hysteria - - -	2
Paralysis - -	2	Amenorrhœa - -	5
Dropsy - - -	2	Menorrhagia - -	2

During the last six weeks, complaints in the stomach and bowels have been very frequent and severe. Diarrhœa and cholera have affected numbers of people, not only in London, but in the surrounding country; and dysentery, bilious vomiting, and constipation with considerable pain; dyspepsia; and irregular action of the intestinal canal, have claimed the attention of the practitioner.

It is very usual to attribute the cause of these complaints to an indulgence in eating fruit. It cannot be denied that this is sometimes the case; but I believe much seldomer than is generally supposed. Disorders of the *primæ viæ* occur chiefly at the latter end of summer, and the beginning of autumn, and more especially when the season has been very warm, as was particularly the last. The vigour and strength of the body are then much impaired; the stomach and bowels are less able to perform the office of digestion; obstructions take place, which occasion inverted peristaltic motion, and the train of symptoms which usually accompany it; and besides all this, heat seems to have a direct influence upon the liver, which secretes more bile than is necessary for the system. Thus we may have all these complaints without any fruit being taken; and so far from its being prejudicial, it may be regarded as peculiarly beneficial at a period when there is so much tendency to vitiated secretion. Two or three of my patients eat fruit, moderately, the day after a severe attack of cholera, without any increase of their symptoms; and very few of them had indulged in fruit or vegetables, previous to their attack, which, in some instances, I had reason to think was occasioned by the too liberal use of wine and malt-liquor. It is well known that dysentery generally prevails in camps during the season when fruit is most plentiful; hence superficial observers have very frequently considered the complaint to be produced by excess in that article. Sir John Pringle, however, who had large experience

experience upon this subject, has stated, that out of many hundred patients whom he attended in dysentery, he never once found it occasioned by eating fruit.

The cases of cholera which I attended, recovered; but I was sent for to see a young woman who died before I could reach the house; she had been ill three days before they thought proper to call in advice; though this complaint is always so distressing and alarming. It is very common for the poor, and even the middle rank of people, when first seized with any bowel-complaint, to swallow a glass or two of ardent spirits; if this is not effectual, they have recourse to a large dose of tincture of rhubarb; which ensures them a Doctor, and sometimes an Undertaker. SAMUEL FOTHERGILL.

Southampton Street, Strand.

Account of Diseases in an Eastern District of London, from the 20th of August to the 20th of September 1807.

ACUTE DISEASES.	
Scarlatina Anginosa	4
Hæmorrhagia Intestinalis	1
Icterus	1
Cholera	12
CHRONIC DISEASES.	
Tussis	12
Dyspnœa	5
Tussis & Dyspnœa	10
Hydrothorax	2
Anasarca	3
Enterodynia	5
Dysenteria	1
Diarrhœa	7
Herpes	3
Scrophula	2
Hysteria	2
Amenorrhœa	7
Menorrhagia	3
Fluor Albus	5
Hypochondriasis	2
Dyspepsia	4
Rheumatismus Chronicus	11
PUERPERAL DISEASES.	
Dolores Post Partum	4
Mammæ Abscessus	2
Rhagas Papillæ	4
INFANTILE DISEASES.	
Febris Mesenterica	2
Ophthalmia	5
Aphthæ	4
Vermes	5

The disease which formed a principal part of the list of the last month, has been protracted to the present list, Cholera still prevails to a considerable degree. The evacuation per anum has, in several instances, been much less than in former cases; but the pain preceding it has been greater, and the disorder has yielded more readily to the use of aperient medicines, than to opiates and astringents. The griping pains complained of, may undoubtedly, in many instances, be attributed to the too early check that has been given to the evacuation.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

YOUR Readers, who are pleased to pay attention to Dr. Cayley's Case of Aneurism, in your 96th Number, and my Observations upon it in your 99th, will soon perceive that the inference I produce is from his own words, and agreeable to truth. The case was certainly of a doubtful nature, otherwise Mr. Strother could have been at no loss in distinguishing it; neither could I have been induced to take any notice of it, had not Dr. Cayley's *candour* to Dr. Stubbs been so very conspicuous. I am neither acquainted with Dr. Cayley nor Dr. Stubbs, so that I can bear no ill will to the one, or favour for the other. Justice requires impartiality, which ought always to be the principal object both in our writings and transactions with mankind. Dr. Stubbs has not come forward himself, to vindicate his character, or give us an account of the case, and the reasons which induced him to propose caustic. This may be owing, perhaps, to his ignorance of any attack being made against him. There are ten medical men in our town, and only four copies of your useful Journal come to it; of course, the other six might remain ignorant of any thing said against their practice, if some of their friends did not acquaint them with it. Dr. Cayley, on the other hand, has not given us an impartial account of this character, whose plan of treatment must have been related to him by second tongue, which seldom repeats it like the first. Were Dr. Stubbs to favour us with his account of the affair, I suppose it would be very different. "This is the ground on which I have undertaken his defence, from ignorance and illiberality. We often find, that Doctors do not always use honourable language to every one regularly educated, and honourably pursuing his profession. Allowing Dr. Stubbs to be an empiric; the language used, had more the appearance of coming from a Dictator than from a meek physician.

We are sorry, says the Derbyshire Practitioner, that Mr. Strother should have been so unnecessarily brought forward. Was he not first called? Did he not heal the wound, which was inflicted by the point of a sheers, by the first intention? Did he not poultice the aneurism for a *long* time? (the length of time is not mentioned.) Was he not going to open it with a lancet, considering it as an abscess? I allow with the practitioner, that every purpose might

might have been answered, without either the names or modes of treatment of Messrs. Strother and Stubbs being mentioned: but the case must have assumed another dress. He then proceeds, " Indeed, at present he has committed no material error; on the contrary, he *has* corrected his first opinion, and *has* discovered and anounced the disease before Dr. Cayley's presence was required.

I believe no one would think, who knows any thing about the arterial system, of applying caustic to aneurism seated upon any of the large trunks, where the patient is exposed to imminent danger, even when the operation is performed by the most expert surgeon. But in a case, like that of Dr. Cayley's, I would have ventured its application without endangering the patient's life; and when he was not willing to undergo the operation, should have proposed it as the next practical method: but in all cases, where it is necessary, I would certainly prefer the operation as most expeditious, and certain. I still have my doubts whether this was true aneurism, several varieties of which are mentioned by authors — The encysted—diffused—and varicose, each of which requires a different mode of treatment. Compression has been recommended by almost every writer upon surgery, with various success. Sometimes it has been found to do good, and at other times mischief. A case of the diffused kind is recorded by Dionis, where four pounds of blood were taken from the superior part of the arm, after the operation of aneurism; where it had been lodged by previous compression. The contents of encysted aneurism, by a very gentle compression, are sometimes made to disappear; it is in such a case as this where compression could have any chance of succeeding; here, aneurism might be considered as an arterial hernia, and could compression be applied without stopping the circulation in the veins or straining the valves, it ought to be tried. An aneurismal truss might be easily contrived for the purpose. Dr. Adams has used something of this kind for compressing the artery in a species of aneurism, which terminated favourably. (See Number 34.) It will shew the wonderful power of Nature in this complaint. Whether the artery was really obliterated by the pressure, Dr. Adams has his doubts, but a very useful fact is afforded us, from which we may derive advantage, not only here, but in every other case of wounded artery; that the blood may be coagulated in them by pressure, and by this means their diameters may be contracted; " and as the pain during pressure arose from the artery overcom-

ing that pressure, it is obvious that the remedy is to increase it; and the success I met with justifies such a conclusion."

Dr. Hunter has considerably enlarged our knowledge of the treatment of varicose aneurism; he informs us, that the operation of obliterating the cavity of the artery, is seldom or ever necessary; that the aneurismal tumour does not here proceed so rapidly; and that when it increases to a certain size, it remains stationary without acquiring additional bulk, and that it may subsist for many years without being productive of much inconvenience to the patient. This is a very important circumstance, as it saves the artery, and the trouble of a very painful operation.

When aneurism is seated upon a part where the operation cannot be performed, gentle compression, blood-letting, a low diet, abstinence from exercise, and the use of opium when indicated by pain, are the only remedies to be depended upon. I believe there are very few instances of Nature curing an aneurism, or gradually obliterating the artery, without the assistance of art. Yet after the operation for aneurism, when it has been suspected that the main trunk has been obliterated, pulsation has been felt at the wrist and ancle. There is no doubt but the branches which were before only secondary, become of more importance, and supply the parts with a greater proportion of blood. On the other hand, instances have been known, where, instead of a return of circulation and sensation, the extremities have become dead, cold, and insensible! And from the want of circulation, the ultimate stage of gangrene has been the consequence. Having pointed out some of the leading particulars in the treatment of this disease, I shall proceed to comment upon the remarks of the Derbyshire Practitioner. He observes, "Dr. Bailey is mistaken in another point." In what? "That the blood was very readily forced into the artery by gradual pressure." Of this circumstance Dr. Cayley must have been a better judge than him. The disappearance of the tumour upon pressure, is one of the diagnostics of the encysted aneurism. In the diffused, the blood will diffuse of itself without much compression, and by this means it can be easily distinguished from the encysted; which of the species of aneurism does the Derbyshire Practitioner think this case to have been? Throughout the whole remarks, he perverts my meaning as well as Dr. Cayley's. He says; I attribute every thing bad to compression. Where does he find me say that He seems, however, to condemn

condemn every kind of compression, and says, "In the general run of practice it is not likely to be much followed. This point, in surgery, seems to be so well settled, as to require but little argument now to enforce it." The Derbyshire Practitioner cannot positively say that it was the anterior tibial artery that was wounded, because we are not told upon what part of the leg the wound was inflicted. A copious hæmorrhage attended, but this was restrained by the pressure of the thumb only, till Mr. Strother was brought from Pately, a distance of three miles, and this hæmorrhage did not afterwards return. They stopped the hæmorrhage themselves, and when Mr. Strother came, all was over; he certainly had nothing to do but bind up the wound. Dr. Cayley does not say that Mr. Strother boldly advanced his finger into the wound to encounter at once the bleeding orifice. The Practitioner has his imagination very much upon the tiptoe in this place. We have no account of the manner in which Mr. Strother treated the wound when he first visited the patient; a blank which ought to be filled.

"To lessen the importance of the arteries of the leg," I am charged with calling them branches of the popliteal artery. The Derbyshire Practitioner will not allow the tibials to be branches of the popliteal; but every anatomist describes them as such; calling them, therefore, what they are, is not lessening their importance. "The crural artery descends on the inner part of the thigh, close to the os femoris, sending off branches to the muscles, and then sinking deeper in the hind part of the thigh, reaches the ham, where it takes the name of *popliteal*: after this it separates into two considerable *branches*, one of which is called the anterior tibial artery; the other divides into two branches; and these arteries all go to be distributed to the leg and foot."

He next proceeds to my case of wounded ulnar artery. I do not wish any one to think that there is any superior intelligence manifested in it. I am only sorry that he does not understand what I meant by sewing the artery. There are two methods of securing an artery; the one is by the tenaculum, and the other by the curved or crooked needle. The tenaculum is certainly preferable; but sometimes when the wound is deep, or the artery buried so that it cannot be laid hold of with the tenaculum, the needle must then be used. Owing to the swelling upon the part, it was found impossible to secure the artery by the tenaculum; securing it with the needle was then had recourse to; I hope this will satisfy him with respect to the term which

I have used. But it has occurred to me, that perhaps he might have thought I had sewed the artery in the manner proposed by Mr. Lambert of Newcastle. He recommends the twisted suture. The Practitioner must think that I have a very nice eye, and great dexterity of hand, if I could give it the glover's stitch. Several objections might be urged against Mr. Lambert's ingenious proposal of sewing the artery in the operation for aneurism; but I shall not enter upon them at present, nor the Practitioner's query about "The nice opposition of the edges of the wound in an artery *affecting its calibre*," which was one of the objections urged against Mr. L's proposal. It is very well that the Practitioner agrees with me about the impropriety of the term *cicatrization*, as used by Dr. Cayley. The internal surface of an artery must be very different from what I have any conception of, if by compression their sides could be cicatrized. The Practitioner is for obliterating the artery at *once* by a single pull of the ligature.—This will do very well upon paper; but cases will happen where one single pull of the ligature is not practicable, as in the case I related, where the man's arm was swelled to the greatness of his thigh.

A similar case, where the ulnar artery was cut with a knife, occurred here sometime previous to the one I have related, which terminated fatally. I did not see it myself, but I was informed that great œdematous swelling and gangrene came on, which soon put a period to the patient's existence. Men of professional consequence attended the case; but had the Derbyshire Practitioner been called, he would have obliterated the artery by a single pull. I shall not transgress farther upon the patience of your readers. I have already observed, that caustic is highly improper to be applied to aneurismal tumour seated upon the large arterial trunks. In other cases, I believe it might be used without endangering the patient's life, which was all that I meant to infer. I am glad that I have not *discomposed* your mind; as to illuminating it, I shall leave for an opportunity of leisure; which is not the case at present. I do not know what might be the consequence, if the encysted aneurism upon any of the large arteries were to be punctured by one of Mr. Hey's needles, nor do I wish to detract from their usefulness in exploring the contents of tumours of a doubtful nature. It is, however, a very happy circumstance, that few surgeons can be at a loss in distinguishing aneursim.

July, 20, 1807. CRITO.

Two Cases of Worms in the Vagina and in the Ear. From the Manuscript Notes of the late Dr. F. B. Sayre.

I HAD one case of worms in the vagina. The patient was a child about two years old. There was considerable excoriation of the parts, with a discharge from the vagina much resembling gonorrhœa. Some heat in making water, and a most troublesome itching. The complaint had continued several weeks, when I was called upon. From the nicest inspection, and most attentive consideraiton of these symptoms, I could by no means satisfy myself of the cause; however, as the child was otherwise in good health, I judged topical applications were alone necessary; and accordingly prepared a solution of saccharum saturni, and furnished the mother with a syringe, directing a little of the solution to be thrown into the part, and the excoriations to be washed with it four or five times a day. After using this remedy three days, small worms, resembling the maggots which are usually formed in cheese, began to come away, and continued to be discharged two or three a day, for many days. They were all dead when discharged, and that they came from the vagina I could not doubt, as I took several of them therefrom myself, by means of a probe introduced for the purpose. When the worms were all destroyed, the discharge ceased, and the child was very soon after, perfectly well. This case happened in the year 1795 to a daughter of Mr. Andrew Nickell, in Nottingham, in the county of Burlington.

In the winter of 1794, I was called upon by Samuel Jones, a shoemaker in Crosswicks, county of Burlington, New-Jersey, for my advice in a case of deafness. This man had a discharge of fetid matter from the ear, a troublesome itching in the part, and had frequently taken worms out of the ear. Several more of these came away whilst he was under my care. They were about the size and shape of a grain of rye, of a light brownish colour, with several circular rings round the body. This complaint had been of some months standing when I was consulted, and though several remedies were employed in the way of injection, the worms continued now and then to make their appearance: the discharge was undiminished and the deafness remained. He was under my care about two weeks, during which time, the only benefit he received, was a diminution of pain. One ear was only affected.

CRITICAL ANALYSIS
OF THE
RECENT PUBLICATIONS
ON THE
DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

Observations on the Application of Lunar Caustic to Strictures in the Urethra and Œsophagus. By M. W. ANDREWS, M. D. Member of the Royal College of Surgeons of London, late Army Surgeon, and now Physician at Madeira. 8vo. Callow, London, 1807.

EVERY Practitioner, and unfortunately very many men, after arriving at advanced age, are sensible of the frequent occurrences of those irksome diseases which attend the necessary actions of life. We cannot therefore but consider the attention which has for some years past been paid to strictures, as among the many advantages which the present age derives from the improvement of medicine. We shall not enter into the question concerning the danger of applying caustics to a membrane so sensible, and a part so situated as the urethra. Few men ask for assistance in these delicate cases, before they find their situation is become too painful to endure, and still fewer submit to the application of the caustic, till they find the common bougies insufficient to relieve them. If among these dreadful cases, some instances may be stated, in which the caustic may have made a new passage, instead of opening the proper channel to the bladder, it is by no means certain that the patient has been in a worse situation than before: and if we contrast with these, the numerous instances in which, after a long and unsuccessful use of the common bougie, the caustic has restored a miserable sufferer to ease and comfort, there can be no question on which side the balance would preponderate.

Whilst we offer this eulogy in favour of a valuable practice, we are ready to believe that it has been used more indiscriminately than is necessary. That, in many instances, the patient might have found all the benefit from the common bougie that the caustic has produced, and that the rage for a new remedy has induced many unfounded suspicions of strictures, where none existed. This accusation is not meant to be confined to this practice. We have seen the town, and every minor practitioner, equally enraged with purgatives, with calomel, as Sangrado was with bleeding, and, as he describes, the practitioners after him, were with *Kermes*. What does all this prove, but that the *vis medicatrix naturæ*, which some are so much disposed to undervalue, is not so easily opposed as we are apt to believe; and as the candid Syden-

ham acknowledged of the Small-pox, that in a mild case the Doctor cannot kill any more than cure a severe one.

We hope not to be suspected of undervaluing the noble art of Medicine by these remarks. Our only wish is, that practitioners would be careful on all occasions to distinguish those cases in which they claim the merit of a cure, or accuse themselves of having done mischief without any title to either, from such as really have been influenced by their interference. In chronic cases this is neither difficult nor dangerous. In acute diseases, though a quicker decision may be necessary, yet this need never supersede those accurate discriminations, and particularly registers, of the result of our practice. By the help of these, we may join empiricism with physiology, the only rational means of establishing a well founded Theory.

We have been led to these remarks by a transient view of the floating doctrines which pass before us, and not by any thing we have found in Dr. Andrews's performance, that is chargeable with the errors above hinted at. The work begins with two short chapters on the nature and causes of strictures. In these we could wish the author had adopted the distinction made by Mr. Hunter, a writer to whom he always shows a becoming respect. The distinction we allude to, is between the permanent and the spasmodic stricture. The first arising from a gradual, and sometimes insensible contraction of the part; the second from a spasmodic action, which is only temporary, and which as often as it occurs, may be relieved by the common bougie. This distinction is the more necessary, because it is by no means certain, that the spasmodic stricture can be relieved by a caustic, nor that it may not even be increased by it.—We shall not enter into the subject of caruncles any further than to remark, that in cases of very high inflammation, there is no reason why the urethra as well as other mucous membranes should not throw out coagulable lymph; and the accuracy of Mr. Hunter's observations would confirm this opinion. That Gentleman describes the only two cases he had seen as resembling "granulations, or what would be called polypi in other parts of the body."

These, however, are trifling objections against a truly useful practical work, the particulars of which we shall proceed to consider.

The first chapter is on the nature of stricture, on which we have nothing further to remark; the second, on the causes, contains nothing new, but some good cases, illustrating those causes which were remarked by Mr. Home. The third is on the symptoms, which are divided into local and constitutional, both of which are described with sufficient accuracy.

In the fourth chapter the treatment of stricture commences.—In this the author shows the frequent insufficiency of the common bougie to produce a permanent cure, and the advantage derived from the introduction of the caustic, as proposed by Mr. Hunter.

On

On this occasion, Dr. Andrews gives a proof of the goodness of his heart, in paying a proper respect to the merits as well as candour of the late Mr. Hunter. That Gentleman having been accused of claiming the invention, Dr. A. shows that he not only was aware that others had proposed this active remedy, but gives Wiseman the credit of entertaining the same idea, and the probable cause of his relinquishing it. This chapter concludes with a short historical view of the progress of the practice.

The fifth chapter, *on the effects of Strictures in the Urethra and neighbouring parts*, contains some very valuable cases, with highly useful practical remarks. The sixth, states *the objections which have been made to the practice.* This is a very long chapter, and, perhaps, many of its readers will say, much longer than is necessary. It must, however, be recollected, that though in the metropolis we know how little consequence is attached to most of the names introduced to be confuted by the author; yet, in remoter parts of the world, the long titles of a Rowley, and the frequency with which another name occurs, may give an ideal importance to both. Mr. Whateley, however, stands on different ground from either, and we almost doubt whether Dr. Andrews has sufficiently attended to all the advantages that gentleman proposes by the substitution of kali purum for argentum nitratum. It must be admitted, that if the operation of the latter is more sudden, it has the advantage of forming so complete a solution, that a very small slough need be separated afterwards. The solution also being saponacious, may in some degree facilitate the passage of the bougie after it has parted with the kali attached to its end. We only offer this observation as conjectural, nor should we have done this, had we found that Dr. Andrews had actually tried the kali, so as to estimate the comparative merits of the two. Whilst we make these remarks, acknowledging that we have no practical experience to guide us, we feel it our duty to add, that in our opinion, all Dr. Whateley's other objections are satisfactorily answered in the chapter before us, and we could not help feeling pleased whilst we perused it, at the zeal which our author shows in defending his master.

The following may serve as a specimen of this as well as of the author's style.

"I cannot conclude this chapter, without making one general remark on Mr. Whateley's observations, relative to the treatment recommended and practiced by Mr. Home. Throughout the whole of them, he is continually making Mr. Home "thrust his large armed bougie through the strictures, until he can obtain a free passage to the bladder." I apprehend this has arisen from Mr. Home, in his work, having frequently used the word "through;" as "the armed bougie passed through the stricture, and the caustic was applied to a second," &c. Mr. H. however, does not mean it to be understood that the force, which he employed, made the bougie pass through the contracted part of the canal, but merely

merely that the action of the caustic had rendered that point sufficiently pervious to admit both bougies being passed further on. That this is his meaning is very evident, and I should not have conceived it possible for any one to have misunderstood it.

"In p. 108 of Mr. Whateley's Treatise, we find the following remark: "It appears highly probable, therefore, that the caustic 'bougie, as used by Mr. Home, is, for want of such extension of 'the penis in cases of this kind, prevented from acting directly on 'the stricture; and that, in consequence of its hitching on some 'part of the urethra, it may sometimes be forced into the substance of the corpus spongiosum, instead of making its way 'through the stricture," &c. &c.

"Mr. Home, in his lectures, is very particular in his directions for passing the armed bougie, particularly when applied to a stricture at seven inches; and, in his Treatise, he recommends the frequent passing of a catheter more curved than ordinary, in those cases that require a great number of applications to the stricture at this point, or when there appears to be any irregularity in the urethra.

"Upon the whole, it would appear that Mr. W's remarks are levelled against Mr. Home, without reflecting that the failure and unpleasant occurrences, in many instances, are owing to the mismanagement of cases in the hands of inexperienced practitioners, and frequently to the imprudence of patients themselves.

"This is evidently intended to overturn one mode of practice by introducing another, which differs only in the kind of caustic used, and the manner of applying it, as he says in p. 127. "At 'the same time there is no doubt, but that many sound cures 'have been made by Mr. Home's mode of treatment; but I contend that these might have been effected by a method of applying caustic, without the risk of producing that dreadful train of 'effects enumerated by him, &c. &c."

The seventh chapter contains thirty-two cases of stricture, relieved by the Lunar Caustic: in some of these, the unarmed bougie had been ineffectually used.

The eighth and last, is a short chapter, containing three cases of stricture in the œsophagus. The first and second are the most valuable, though not the most successfully treated. But they contain the account of the appearances after death, which cannot be so well understood without the annexed drawings. We shall therefore transcribe the last.

"Case III.—A poor woman, about 50 years of age, applied to me in April, 1805. Since August, 1804, she had experienced great difficulty in swallowing any thing, either fluid or solid, and, within the last ten weeks, could get nothing into the stomach but what was perfectly fluid; any attempt to swallow solids produced vomiting.

"On the 18th of April, I applied the caustic, and repeated it on the 19th and 20th. On the 21st, I passed an unarmed bougie into

into the stomach; on the 22d, 23d, and 25th, I passed a probang with great ease, and, as she swallowed tolerably well, I allowed her to return to her friends in the country.

"In May following she came back to me, as she again found great difficulty in swallowing, the act often producing vomiting; on the 11th, I applied the caustic, and repeated it on the 12th and 15th, after which she went into the country perfectly relieved."

Such are the contents of Dr. Andrews's work, as far as our limits will permit us to pourtray it. If it is neither adorned with brilliancy, nor enriched with novelty, it contains many useful practical remarks, is written with becoming modesty, and gives us reason to hope that his sojournment in the Island of Madeira, will be useful to science as well as to the inhabitants of that favoured spot.

Pethox Parvus, Dedicated, without Permission, to the Remnant of Blind Priests of that Idolatory. By ICONOCLASTIS, 8vo. Murray, 1807.

THE object of this little brochure, is to ridicule those who still retain their attachment to Small-pox Inoculation. But it should be recollected, that ridicule is so far from being the test of truth, that for the most part it is more commonly resorted to when truth is too powerful for those who use such random weapons. We therefore conceive so good a cause is rather injured by such a performance, especially when ushered in without a name. Our opinion of vaccination is too well known to be repeated, but we never wish to encourage that illiberal spirit which would misinterpret the best endeavours of benevolent characters. We transcribe the following note, to show the spirit of the author, and in justification of our own remarks.

"Hospitals were originally founded by humane men to preserve the lives of the poor: but the Small-pox Hospital so far deviates from this purpose, that it has become one of the principal sources of mortality in this town. Above 2000 persons are infected annually with a contagious disease at this house, which is likewise a market where infectious matter is sold at an unconscionable price to all who apply for it; by which means the contagion is perpetually disseminated through all the streets, lanes, and narrow courts of this crowded city. It is difficult to judge of the motives which actuate the Governors. Do they believe it charity to bestow death? And do they agree with Mr. Malthus, in considering it a benevolent act to sweep away a redundant population? Whatever are their motives, we are astonished that any medical men should consent to be the executioners of this species of patriotism. We hope the legislature will soon relieve them from any notion of political duty they may entertain, and will snatch the murderous lancet from their hands."

Now it appears by the Report of the College of Surgeons, that

out of 164,381 who have been vaccinated by their own members, nearly one in a thousand cases have been followed by subsequent small-pox, or eruptions consequent on the introduction of vaccine virus; without reckoning any occurrences of small-pox, excepting in such as have been vaccinated by the surgeon reporting the facts. This is enough to alarm those whose nearer connections have been the subjects of such untoward events, and to them some little delicacy is due. As to the propriety of preventing small-pox inoculation, we shall only remark, that, however proper it may be, it does not appear how it should be more necessary now, than before the introduction of vaccination.

The Ancient and Modern History of Nice, comprehending an Account of the Foundation of Marseilles; to which are prefixed, Descriptive Observations on the Nature, Produce, and Climate of the Territory of the former City, and its adjoining Towns, with an Introduction, containing Hints of Advice to Invalids, who, with the hope of arresting the Progress of Disease, seek the renovating Influence of these salubrious Climes. By J. B. Davies, M. D. one of the British Captives, at Verdun; Author of the Project de Reglement concernant les Décès, and Member of several Medical Societies, 8vo. London, 1807.

Nothing is more unthankful to a Physician, than the office of recommending change of climate to a patient. If the patient wishes to go, he will interpret the Doctor's opinion accordingly: if not, he will stay so late after the advice is given him, that the best thing he could do, would be to stay at home. The present work shows, with a most desirable accuracy, every part of the question, and describes the climate and accommodations of Nice, as well as the particulars attending the voyage, with a minuteness highly necessary for the class of readers for whom it is intended.

The rest of the work not being connected with the object of our labours, we shall omit to notice.

A Letter containing some Observations on Fractures of the Lower Limbs. To which is added, an Account of a Contrivance to administer Cleanliness and Comfort to the Bed-ridden, or Persons confined to Bed by Age, Accident, Sickness, or any other Infirmity, with explanatory Plates. By Sir James Earle, F. R. S. Surgeon Extraordinary to his Majesty, and Senior Surgeon to St. Bartholomew's Hospital, 8vo. Callow, London, 1807.

It is so difficult to give an accurate account of any machinery, without plates, that we shall only remark the present attempt to relieve the irksomeness and pain of those who are confined to their beds, does equal credit to the author's head and heart.

A Rowland

A Rowland for an Oliver, in Answer to Dr. Moseley's Oliver for a Rowland, and to Mr. Birch: containing a Defence of Vaccination. By John Ring, Member of the Royal College of Surgeons in London, and of the Medical Societies of London and Paris.

It has been remarked, that contests with the pen differ from those with the sword or pistol, not more in the weapons than in the progress and termination. In the latter, the victor remains last in the field; in the former, the vanquished. In the latter the weapons and ammunition are made as similar and equal as possible; in the former, each combatant is at liberty to use poisoned arrows and unfair arms: but instead of their giving any advantage in the contest, it is generally observed that they demonstrate the weakness of the champion, and lead to speedy defeat and disgrace. These weapons wound their Author more by their recoil, than the enemy against whom they are directed. Impressed with these sentiments, we wish Mr. Ring had left his adversaries to perish by their own arms, rather than to have put himself on a level with them, and thereby exalted them into some notice.

INTELLIGENCE.

Government having purchased the Museum of the late John Hunter, Esq. whose choice and rare Collection of natural and artificial Curiosities are so very peculiarly qualified to serve the science of Surgery, have thought it expedient to convert the whole of it to the public benefit, by presenting the same to the Royal Corporation of Surgeons: for which purpose a commodious and extensive building is erecting in Lincoln's-inn-square, where this valuable and splended assemblage will be deposited, and where, within one extensive area, will be at once concentred, the Corporation Hall, the Anatomical Theatre, the Repository of Curiosities, and the several apartments and Chambers of the Officers of the Corporation. The grand front will be towards Portugal-street. The whole structure will be completed early in the ensuing spring, and present a splendid edifice.

Sir Joseph Banks has recently stated the advantages to be obtained by inuring tender plants, natives of warmer climates, to bear the severity of that of England. In the case of annuals, he mentions this is effected with little trouble, as all that is required is to enable them to ripen their seed in a comparative cold summer, after which the hardest frost will have no power to injure it: but a perennial has to encounter frosts with its buds and annual shoots, that have sometimes been so severe with us as to render asunder the trunks of our indigenous forest trees. In 1791, some seeds of Zizania aquatica were procured from Canada, and sown in a pond at Spring Grove, near Hounslow. They grew,

and

and produced strong plants, which ripened their seeds. These vegetated in the succeeding spring, and so on evey year, the plants springing up from the seeds of the preceding year, and becoming visibly stronger and larger, and rising from deeper parts of the pond, till the year 1804, when several of the plants were six feet high, and the whole pond was in every part covered with them. From this and other similar experiments, Sir Joseph proposes to sow the seeds of such shrubs as occasionally ripen them in the English climate, after the example of the Zizania, which, in fourteen years, became completely naturalized to our climate.

M. Lechenault, one of the Naturalists belonging to the expedition under Captain Baudin, who was detained at Batavia by illness, has just arrived at Nantz with a superb collection of Natural History, and one of the most valuable collections of East India arms and instruments, procured from Otaheite, Java, and the adjacent islands. He has neglected no means of enriching Natural History, by furnishing several kinds hitherto unknown.

The Josephine Academy of Surgery, at one of its late meetings, was principally engaged in a careful examination of the conductor of light, invented by Dr. Bozzini, of Frankfurt on the Mayn, and which is intended to illumine the internal parts and cavities of the body. The experiments, which were made on corpses, were attended with results highly hounourable and satisfactory to the inventor, and fully demonstrated the utility of this ingenious contrivance. It is more than doubtful, however, that the application of this conductor of light to living persons will be attended with very great difficulties.

St. George's Hospital.

Mr. Home's Lectures on the Principal Operations in Surgery, given gratuitously to the pupils of this Hospital, will commence in October next, as usual.

Mr. Gunning, Surgeon to St. George's Hospital, will commence his Lectures on the Principles and Operations of Surgery, on Monday the 5th of October next, at eight o'clock in the evening.——Particulars may be known at Mr. Gunning's house, 45, Conduit Street, Hanover Square, or at St. George's Hospital.

Dr. Clough, Physician and Man-midwife to the St. Mary-le-bone General Dispensary, &c. will, on Monday, the 5th of October, at ten o'clock in the morning, commence his Course of Lectures on the Theory and Practice of Midwifery, and on the Diseases of Women and Children. Further particulars may be known on application to Dr. Clough, No. 68, Berner's Street; Mr. Wilson, Medical Agency Office, No. 56, St. Paul's Church Yard; and at the Dispensary, No. 77, Welbeck Street.——N. B. An Evening Course, for the accomodation of such Students as cannot attend the Morning Lectures, will be given on Tuesdays, Thursdays, and Saturdays, during the Winter, at seven o'clock.

Dr. Hooper will commence a Course of Lectures on the Theory and Practice of Physic, the Materia Medica, and Pharmaceutical

ceutical Chemistry, on Monday, the 12th of October, at his Lecture Room, in Cork Street, Burlington Gardens, at eight o'clock in the morning.

Mr. MOOR, Surgeon Dentist to her Royal Highness the Duchess of York, will commence a Course of Lectures on the Structure and Diseases of the Teeth, on the 5th of November, in which will be explained the Complete Practice of the Dentist. Further particulars may be known at his house, No. 6, Palsgrave Place, Temple.

Dr. REID's Course of Lectures on the Theory and Practice of Medicine will recommence, on Monday, the 5th of October, at eight o'clock in the evening, at his house in Grenville Street, Brunswick Square; at which place the ensuing Lectures will be delivered at ten o'clock on the mornings of Mondays, Wednesdays, and Fridays.

Mr. TAUNTON will commence his Autumnal Course of Lectures on Anatomy, Physiology. Pathology, and Surgery, on Saturday, October 3, 1807, at eight o'clock in the evening, at his house in Greville Street, Hatton Garden. The Lectures will be continued every Tuesday, Thursday, and Saturday, at the same hour.

M. ALIBERT, Physician of the Hospital of St. Louis, has commenced a work on Disorders of the Skin. The second number relates to that dreadful disorder the *Plica*, of which he enumerates five sorts. He describes their general and particular symptoms, their analogy with the disorders, and the causes favourable to their production, Five instances have been found in Paris; he has gathered his information from these, and from an extensive correspondence with Polonese physicians.

Mr. ACCUM, Lecturer on Practical Chemistry and Mineralogy, has begun to print A System of Mineralogy and Mineralogical Chemistry, and its Application to the Arts. The work is formed chiefly on the plans of Stacey and Brongniart, and will be published in 2 vols. 8vo. with eight copper-plates.

Dr. BEDDOES, has in contemplation, a Medical Work of great extent, comprising a Collection of Facts, made by the Original Observers of Fever in all Nations.

THE Election of Medical Officers to the London Female Penitentiary, took place, by ballot, on Friday, Sept. 11, when there were ten candidates. The majority of votes were in favour of Dr. Pinckard as Physician; Mr. Blair as Surgeon; and Mr. S. Griffith as Apothecary.

NEW MEDICAL PUBLICATIONS.

A Treatise on the Diseases of the Joints; being the Observations for which the Prize for 1806 was adjudged by the Royal College of Snrgeons in London; by Samuel Cooper. 5s. 8vo. bound.

A Popular View of Vaccine Inoculation, with the Practical Mode of Conducting it, shewing the Analogy between the Small-Pox, and the Cow-Pox, and the Advantages of the latter; by Joseph Adams. 4s. 6d. boards.